	State of Rh Office of the Sec		Fee: \$50.00
HOPE	Division Of Bus 148 W. Ri Providence RI (401) 22	ver Street 02904-2615	
Limited Liability Com Annual Report Filing Period: September 1 ·			
	7-16-66(d), each limited liability n thirty (30) days after the time penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2020</u>		
<b>1. ID No.</b> <u>001672924</u>			
2. Exact Name of the Limited Liability Company DADA REALTY, LLC			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
-	code that best describes the pri information on <u>NAICS</u> can be f		the entity. Download
	Character of the Dusiness )	Which is Astually Conducts	d in Dhada Jaland
4. Brief Description of the	e Character of the Business V	vnich is Actually Conducte	a in Knode Island
REAL ESTATE			
5. Principal Office Addres	55		
	<u>WEST SHORE ROAD</u> <u>WICK</u>	State: <u>RI</u> Zip: <u>02889</u>	Country: <u>USA</u>
6. Mailing Address of Lin	nited Liability Company and	Name or Title of Contact P	erson:
Contact Name: Contact T No. and Street: <u>1196</u> City or Town: <u>WAR</u>	WEST SHORE ROAD	State: <u>RI</u> Zip: <u>0288</u>	9 Country: <u>US</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name First, Middle, Last, Suffix	Address, City or Town, S	
8. RESIDENT AGENT IN R	HODE ISLAND - DO NOT ALT	ER	

## Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

## JOSEPH A. LAMAGNA 2417 MENDON ROAD WOONSOCKET, RI 02895

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 30 Day of October, 2020 at 3:05:45 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

By <u>ANKIT PATEL</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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