State of Rhode Island Office of the Secretary of State       Fee: \$50.         Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040       State of Rhode Island         Limited Liability Company Annual Report       Filing Period: September 1 - November 1         In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7- 16-66(b&c)) is subject to a penalty fee of \$25.00.         ANNUAL REPORT YEAR: 2020       1.         1. ID No.       000849600         2. Exact Name of the Limited Liability Company SAN DIEGO, LLC         3. State of Formation State: RI         Chief Description of the Character of the Business Which is Actually Conducted by the entity. Download the list of codes here. More information on NAICS can be found online.         531311         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island REAL ESTATE         5. Principal Office Address         No. and Street:       379 PLAINFIELD STREET
148 W. River Street Providence RI 02904-2615 (401) 222-3040         Limited Liability Company Annual Report         Filing Period: September 1 - November 1         In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7- 16-66(b&c)) is subject to a penalty fee of \$25.00.         ANNUAL REPORT YEAR: 2020         1. ID No.       000849600         2. Exact Name of the Limited Liability Company SAN DIEGO, LLC         3. State of Formation State: RI         ARTICLE III         Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online.         531311         4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island REAL ESTATE         5. Principal Office Address
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REAL ESTATE       5. Principal Office Address
5. Principal Office Address
No. and Street: 379 PLAINFIELD STREET
City or Town: <b>PROVIDENCE</b> State: <b>RI</b> Zip: <u>02909</u> Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:
Contact Name: <u>JUAN CARLOS SIPAQUE</u> Contact Title: <u>OWNER</u> No. and Street: 379 PLAINFIELD STREET
City or Town:       PROVIDENCE       State: RI       Zip:       02909       Country:       USA
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS
Title Individual Name Address
First, Middle, Last, Suffix Address, City or Town, State, Zip Code, Country
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER

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

JUAN CARLOS SIPAQUE 379 PLAINFIELD STREET PROVIDENCE , RI 02909

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 3:39:45 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 JUAN CARLOS SIPAQUE

Signature of Authorized Person

Form No. 632 Revised 09/07

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