RI SOS Filing Number: 202072434080 Date: 11/4/2020 4:00:00 PM



→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

FILED	
100 0 4 2020 12036	OV

1. Entity ID Number	2 Evact name	of the Limited Lie	bilib. Company	<u> </u>		
1 '	2. Exact name of the Limited Liability Company					
000127825						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
53/110	Real Estate Investments					
5. State of Formation	·	•				
RI						
6. Principal Office Address			City	State	Zip	
216 Guay (Kair Road			M'ddle tous	RT	02842	
7. Mailing Address of Limited Lia			of Contact Person	<u> </u>	10207:0	
ContactName Tholpew F. Nicole/ta			Contact Title			
Street Address		,	City 1 1/0 4 mg	State	Zip O / / d	
8 List All managers / nomes as	7		Middletown	LET	02842	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS Manager Name						
Pholnew F.	Micoletta Manager Name					
Street Address That CR	ress Street			Street Address		
Middle town	State RI	02842	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Check the box to indicate an attachme						
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.						
Under penalty of perjury, I dec statements, and that all statem	lare and affirm ents contained	that i havé exam herein are true	ined this report, including any a and correct.	accompanying s	schedules and	
Name of Authorized Person Date						
Fludrew F. Kingatta			10/27/20			
Signature of Authorized Person						
	Ÿ.	X	· · · · · · · · · · · · · · · · · · ·	<u> </u>		
	/\	XI				
MAIL TO:	//					

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov