RI SOS Filing Number: 202073537230 Date: 11/10/2020 4:00:00 PM



State of Rhode Island

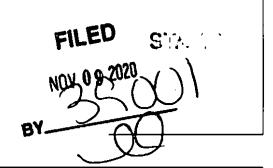
## **Department of State - Business Services Division**

Annual Report for the year: 2020 Limited Liability Company

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

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



Entity ID Number	2. Exact na	2. Exact name of the Limited Liability Company				
815044	Living Spa	Living Space, LLC				
3. NAICS Code		4. Brief description of the character of business conducted in Rhode Island				
531390	Real Estate	Real Estate				
5. State of Formation						
RI						
6. Principal Office Address			City	State	Zip	
122 Touro Street			Newport	RI	02840	
7. Mailing Address of Limit		any and Name o				
Contact Name Michael W. Miller			Contact Title Registered /	Contact Title Registered Agent		
Street Address 122 Touro Street			City Newport	State RI	<sup>Zip</sup> 02840	
	mes and addresse	s) of the Limited	Liability Company, IF APPLICA	ABLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
				Check the box to	indicate an attachment	
			e RI Department of State is acc			
Under penalty of perjury, statements, and that all s	, I declare and aff state <u>ments conta</u>	irm that I have inned herein are	examined this report, includi true and correct.	ing any accompanyin	ig schedules and	
Name of Authorized Person	λη . Λ			Date		
GLORIAL	We Ro	THANT		October 5, 2020		
Signature of Authorized Pe	arson	1	TH			
	_ >//	wym	Liked			

MAIL TO:

Division of Business Services

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

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