RI SOS Filing Number: 202075211110 Date: 11/12/2020 4:00:00 PM



Departm. at of State - Business Services Division

FILED

Annual Report for the year:

NOV 1 2 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

| 1. Entity ID Number | 2. Exact na | 2. Exact name of the Limited Liability Company | | | | |
|--|-------------------|---|--|-------------------------|-------------------|--|
| 788484 | | 12 ROCKY HILL ROAD, LI.C | | | | |
| 3. NAICS Code | 4. Brief de | 4. Brief description of the character of business conducted in Rhode Island | | | | |
| 531110 | Real Estate | Real Estate | | | | |
| 5. State of Formation | | | | | | |
| Rhode Island | | | | | | |
| 6. Principal Office Address | | | City | State | Zip | |
| 20 ALBERTA STREET | | | НОРЕ | RI | 02831 | |
| 7. Mailing Address of Limite | | any and Name o | | | 1 | |
| Contact Name MICHAEL SPAZIANO | | | Contact Title Member | | | |
| Street Address 20 Alberta Street | | | ^{City} Hope | State RI | Zip 02831 | |
| 8. List ALL managers (nan | nes and addresse | s) of the Limited | Liability Company, IF APPLI | CABLE - DO NOT LIST | MEMBERS | |
| 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 | | |
| 9. The Resident Agent info | rmation currently | of record with th | e RI Department of State is a | ccurate. Changes requir | e filing Form 642 | |
| Under penalty of perjury, statements, and that all s | | | examined this report, inclu true and correct. | ding any accompanyin | g schedules and | |
| Name of Authorized Persor | n . | -· · | | Date | | |
| Michael Spaziano | | | | / | -4-20 | |
| Signature of Authorized Pe | | | | • | | |

MAIL TO:

Division of Business Services

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

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