RI SOS Filing Number: 202075232890 Date: 11/12/2020 4:00:00 PM

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	State of Rhode Island
	State of Rhode Island  Department of State - Business Services Division
2. 1.	

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.

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BY_		119 00	<u> </u>					

1 Entity ID Number	[2, 5, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,		2.1.77. 0					
Entity ID Number     Exact name of the Limited Liability Company								
1693319 4 MARKET STREET, LLC								
3. NAICS Code	4. Brief desc	ription of the char	acter of business conduct	ed in Rhode Island	<del>=</del>			
531190	Lessors of mixed-use real estate.							
5. State of Formation	1							
Rhode Island								
6. Principal Office Address			City	State	Zip			
17 Campbell Street			Warren	RI	02885			
7. Mailing Address of Limited Lia		y and Name or Tit	le of Contact Person	<u></u>				
Contact Name Thomas E. Wright	, Esq.		Contact Title Registered Agent					
Street Address 572 Main Street			City Warren	State RI	Zip 02885			
8. List ALL managers (names ar	nd addresses)	of the Limited Lia	bility Company, IF APPLI(	CABLE - DO NOT LIST M	EMBERS			
Manager Name Leslie A. Hartwell .			Manager Name					
Street Address 17 Campbell Street			Street Address					
City Warren	State RI	Zip 02885	City	State	Zip			
Manager Name David Jameson			Manager Name					
Street Address 17 Campbell Street			Street Address					
City Warren	State RI	Zip 02885	City	State	Zip			
			<del>.</del>	Check the box to in-	dicate an attachment			
9. The Resident Agent information	n currently of	record with the RI	Department of State is a	ccurate. Changes require	filing Form 642.			
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.								
Name of Authorized Person Date /								
Leslie A. Hartwell & David Jameson /0/30/2020								
Signature of Authorized Person Paril Value  Paril Value  V								
/					<del>-</del>			

MAIL TO:

**Division of Business Services** 

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

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