RI SOS Filing Number: 202075935890 Date: 11/17/2020 4:00:00 PM

Department of	f State - Bus	siness Service	es Division			
Annual Report for the	e vear: ²⁰²⁰)		FILE	STAMP D	
Limited Liability Company			A CONTRACT CAR			
→ Filing period: Septemb	•	per 1	NOV 1 7 2020			
→ Filing Fee: \$50.00			2000			
→ Penalty: Additional \$25).00 fee if form i	is not filed by Dece	ember 1.	BY	52459	
1. Entity ID Number	2. Exact na	2. Exact name of the Limited Liability Company				
507440	Publican C	Publican Capital LLC				
3. NAICS Code	4. Brief des	4. Brief description of the character of business conducted in Rhode Island				
531390	To buy, sel	To buy, sell and hold real estate.				
5. State of Formation						
Rhode Island						
6. Principal Office Address			City	State	Zip	
15 Shore Drive			Johnston	RI	02919	
7. Mailing Address of Limited	I Liability Compa	iny and Name or Tit	le of Contact Person			
Contact Name Adam Belesimo			Contact Title Member			
Street Address 15 Shore Drive			City Johnston	State RI	Zip 02919	
8. List ALL managers (name	s and addresses	s) of the Limited Lial	bility Company, IF APPLIC	CABLE - DO NOT LIST N	IEMBERS	
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	
		1	1	Check the box to in	ndicate an attachment	
9. The Resident Agent inform	nation currently o	of record with the RI	Department of State is a	ccurate. Changes require	filing Form 642.	
Under penalty of perjury, i statements, and that all sta	declare and affi itements contai	īrm that i have exa ined herein are tru	mined this report, include and correct.	ding any accompanying	schedules and	
Name of Authorized Person				Date	///	
Adam Belesimo				16/	29/20	
Signature of Authorized Pers	on			• /		

MAIL TO:

Division of Business Services

State of Rhode Island

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

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