RI SOS Filing Number: 202075946940 Date: 11/17/2020 4:00:00 PM

State of Rhode Isla Department of
Department o

State of Rhode Island Department of State - Business Services Division

FILED

NOV 1 7 2020

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.

1. Entity ID Number		2. Exact name of the Limited Liability Company					
847892	2 HOXIE A	2 HOXIE AVENUE, LLC					
3. NAICS Code	4. Brief des	4. Brief description of the character of business conducted in Rhode Island					
531311	REAL EST.	REAL ESTATE MANAGEMENT					
5. State of Formation							
RHODE ISLAND							
6. Principal Office Addres	 Ss		City	State	Zip		
2 HOXSIE AVENUE			CHARLESTOWN	RI	02813		
7 Mailing Address of Lim	sited Liability Compa	env and Name or	r Title of Contact Person				
 Mailing Address of Limited Liability Company and Name or Title Contact Name CLINTON R. McLEAN 			Contact Title				
CLINTON	R. McLEAN		35.11.2				
Street Address 77 OLD ANSONIA ROAD			City SEYMOUR	State CT	^{Zip} 06483		
8. List ALL managers (na	ames and addresses	s) of the Limited	Liability Company, IF APPLICABI	LE - DO NOT LIST I	NEMBERS		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip		
				Check the box to i	ndicate an attachment		
9. The Resident Agent in	formation currently (of record with the	e RI Department of State is accur	ate. Changes require	e filing Form 642.		
	ry, I declare and aff	firm that I have	examined this report, including				
Name of Authorized Pers		•		Date //	1		
CLINTON R. McLEAN				''/'	1/2020		
Signature of Authorized I	Person						

MAIL TO:

Division of Business Services

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

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