State of Rhode Island
Department of State - Business Services Division

FILED

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							
1341055	21 Cooke, LLC							
NAICS Code 4. Brief description of the character of business conducted in Rhode Island To hold and manage real estate						ıd		
5. State of Formation RI								
6. Principal Office Address			City		State		Zip	
21 Cooke Street			Bristol		RI			09
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person								
Contact Name Gardiner Bowen			Contact Title Member					
Street Address 5 Prospect Street			City Bristol	Bristol		RI	Zip)2809
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS								
Manager Name Nonc			Manager Name Nonc					
Street Address			Street Address					
City	State	Zip	City		State		Zip	
Manager Name Nonc			Manager Name Nonc					
Street Address	Street Address							
City	State	Zip	City		State		Zip	
Check the box to indicate an attachm								n attachment
9. The Resident Agent information currently of record with the RI Department of State is accurate. 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.								
Sardiner Bowen Date Date Date Date								
Signature of Authorized 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 NOV 1-8 2020