

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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1. Entity ID Number 1679108		2. Exact name of the Limited Liability Company 630 Main EO, LLC				
3. NAICS Code 531390	Activities rel	4. Brief description of the character of business conducted in Rhode Island Activities related to real estate and any and all lawful activities permitted in accordance with the Rhode Island Limited Liability Act.				
5. State of Formation		ta Bibbility rice.				
Rhode Island						
6. Principal Office Address			City	State	Zip	
1140 Reservoir Avenue			Cranston	RI	02920	
7. Mailing Address of Limited	d Liability Compan	y and Name or Tit				
Contact Name James A. Procaccianti			Contact Title Manager			
Street Address 1140 Reservoir Avenue			City Cranston	State RI	Zip 02920	
8, List ALL managers (name	es and addresses)	of the Limited Lia	bility Company, IF APPLICA	ABLE - DO NOT LIST	MEMBERS	
Manager Name James A. Procaccianti			Manager Name			
Street Address 1140 Reservoir Avenue			Street Address			
City Cranston	State RI	^{Zip} 02920	City	State	Zlp	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
				Check the box to	indicate an attachment	
9. The Resident Agent infor	mation currently of	record with the R	I Department of State is ac	curate. Changes requi	re fillng Form 642.	
Under penalty of perjury, a statements, and that all st	declare and affiliatements contain	m that I have ext	amined this report, includ ю and correct.	ing any accompanyi	ng schedules and	
Name of Authorized Person				Date		
James A. Procaccianti				November 11, 2020		
Signature of Authorized Per						

MAIL TO:

Division of Business Services

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

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

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FORM 632 - Revised: 08/2020