RI SOS Filing Number: 202077285650 Date: 11/23/2020 4:00:00 PM



State of Rhode Island

## Department of State - Business Services Division

Annual Report for the year: **Limited Liability Company** 

2020

- → 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							
1. Entity ID Number	2. Exact name of the Limited Liability Company						
791150	TRF-BI, LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
531311	Real estate investment						
5 Characteristics	4						
5 State of Formation RI	<del>-</del> ll						
KI	<u> </u>						
6. Principal Office Address			City		State	Zip	
23 Pickman Road			Beverly		МА	01915	
7 Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Benjamin Tenney Healy			Contact Title Manager				
Street Address 23 Pickman Road			City Beverly		State MA	Zip 01915	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name Benjamin Tenney Healy			Manager Name None				
Street Address 23 Pickman Road			Street Address				
City Beverly	State MA	Zip 01915	City		State	Zıp	
Manager Name None			Manager Name None				
Street Address			Street Address				
City	State	Zip	City		State	Zıp	
				Che	ck the box to ind	icate an 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.							
Name of Authorized Person Date							
Benjamin Tenney Healy							
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