RI SOS Filing Number: 202077612230 Date: 11/25/2020 4:00:00 PM

State of Rhode Isl Department		siness Servi	ices Division	FII_ED	202	
Annual Report for t	he year. 2020	0	-	NOV 2 5 2020	R.I. DEPT. BUS SV	
imited Liability Co	ne year			NUV Z 3 &UZU	25 SV SV 50E	
→ Filing period: Septer		ber 1	BY_	101		
→ Filing Fee: \$50.00 → Penalty: Additional \$	25.00 fee if form	is not filed by De		00	S DIV	
1. Entity ID Number 001669473	I	2. Exact name of the Limited Liability Company MENDON ROAD PARTNERS LLC				
3. NAICS Code 531120		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE HOLDING				
5. State of Formation RHODE ISLAND						
6. Principal Office Address	* <u>-</u>		City	State	Zip	
519 MENDON ROAD			CUMBERLAND	RI	02864	
7. Mailing Address of Limit	ed Liability Compa	any and Name or	Title of Contact Person		\	
Contact Name GARY R ALGER			Contact Title AGENT			
Street Address PO BOX 8000			City CUMBERLAND	State RI	Z _{iP} 02864	
·	nes and addresse	s) of the Limited I	Liability Company, IF APPLICABL	E - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Ζιρ	City	State	Ziρ	
Manager Name			Manager Name			
Street Address /			Street Address			
City	State	Zip	City	State	Zıp	
		•		Check the box to	indicate an attachment	
			RI Department of State is accura			
Under penalty of perjury, statements, and that all s	. I declare and aff	firm that I have e	examined this report, including the and correct	any accompanyir	ng schedules and	
Name of Authorized Person		o noroni are	and the confect.	Date		
GARY R ALGER				10/30/2020		
Signature of Authorized Pe	erson					
		4 1/				
	M 1					
MAIL TO:	, /	/ /				
ivision of Business Serv 48 W. River Street, Provide		02904-2615				
hone: (401) 222-3040		,				