



State of Rhode Island

Department of State - Business Services Division

FILED

DEC 08 2020

BY

586 DS

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 145519		2. Exact name of the Limited Liability Company 379 ATWELLS, LLC			
3. NAICS Code 999999		4. Brief description of the character of business conducted in Rhode Island TO ENGAGE IN ANY BUSINESS PERMITTED UNDER THE LIMITED LIABILITY ACT			
5. State of Formation Rhode Island					
6. Principal Office Address 42 Washington Street, Suite 300		City Wellesley		State MA	Zip 02481
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name William M. Wieners			Contact Title Manager		
Street Address 42 Washington Street, Suite 300		City Wellesley		State MA	Zip 02481
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name William M. Wieners			Manager Name		
Street Address 42 Washington Street, Suite 300			Street Address		
City Wellesley	State MA	Zip 02481	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
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 WILLIAM M. WIENERS				Date 9/25/2020	
Signature of Authorized Person 					

MAIL TO:

Division of Business Services

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