State of Rhode Island and Providence Plantations

Department of State - Business Services Division

RECEIVED R.I. DEST. OF STATE VIC SCVC SUB

2020 NOV 17 P 2: 54

\$120 A

House the second

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

RECEIVED HDEPT. OF STATE BUS SVCS DIV

→ 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 9486 2. Exact name of the Limited Liability Company Equipox Toperty Group L.C.					
3. NAICS Code 531110 4. Briefdescription of the character of business conducted in Rhode Island					
5 State of Formation Pental Property					
5. State of Formation					
TI					
6. Principal Office Address			City	State	Zip
154 Cachran St			W. Warw	Rエ	02893
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name T Mattig			Contact Title Manager		
Street Address Cochran St			W. Waru	State	Zip D 2893
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Mapager Name J Mattice			Manager Name Den 9 M attie		
Siled Address Cochran ST			Street Address Scem C		
W. Warw	SIPT	02893	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. 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 Althorized Person Date 12 28 7020					
Yail J Mattia				10-0	0-5020
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 FILED C

DEC 28 2020

BY On YDDHR