

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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

RECEIVED R.I. DEPT. OF STATE BUS SYCS DIV

2020 DEC 28 P 1: 31

→ 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 2. Exact name of the Limited Liability Company = 509428. = quillox roperty Group L.C.					
3. NAICS Code 53 1110 4. Bnot description 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	RI	02893
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contagname J Mattiq			Contact Title Manager		
Street Address Cochran St			W. Wary	State I	2ip 02893
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name J Mattice			Manager Name Oranger Name	Mad	tiq
Street Address Cochran ST			Street Address Same		
w.warw	Start	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.					
None (1.4.5-1.7.1.7.1.7.1.7.1.7.1.7.1.7.1.7.1.7.1.7					
SAID T MATTIGE 10/30/2020					
Signature of Juthorized Person					
FILED					

MAIL TO:

Division of Business Services

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

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