RI SOS Filing Number: 202187559180 Date: 1/21/2021 3:35:00 PM

State of Rhode Isla  Department of		iness Servic	es Division			
Annual Report for th Limited Liability Cor  → Filing period: Septem → Filing Fee: \$50.00 → Penalty: Additional \$2	mpany nber 1 - Novembe	 er 1	ember 1.	, ·	R.I. DEPT. OF ST BUS SVCS D	
1. Entity ID Number	2. Exact nar	ne of the Limited L				
000795058	Patria LLC			ស 📉		
3. NAICS Code 531390	l l	Bnef description of the character of business conducted in Rhode Island     Holding real estate				
5. State of Formation Rhode Island						
6. Principal Office Address			City	State	Zıp	
243 Knight St.			Providence	RI	02909	
7. Mailing Address of Limite		ny and Name or Tr	tle of Contact Person			
Contact Name Michael G. M	агта	<u> </u>	Contact Title Owner			
Street Address 243 Knight St.			City Providence	State RI	Zip 02909	
8. List ALL managers (nam	es and addresses)	of the Limited Lia	ibility Company, IF APPLICAL	BLE - DO NOT LIST N	MEMBERS (D)	
Manager Name			Manager Name		多い問題	
Street Address			Street Address	<del> </del>	SVCS	
City Providence	State RI	Zip 02909	City	State	ZIP OIVA	
Manager Name			Manager Name		ည က	
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	l	·		Check the box to in	ndicate an attachment	
9. The Resident Agent infor	mation currently of	record with the R	Department of State is accu			
Under penalty of perjury, statements, and that all s	i declare and affir	m that I have exa	amined this report, including	ng any accompanying	g schedules and	
Name of Authorized Person Date						
Michael G. Marra				1/5/21		
Signature of Authorized Per	rson	-	<del></del>			
Signature of Authorized Pel	Q-Was	no				
(		· ·	·····			
V						

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

JAN 21 2021

FORM 632 - Revised: 08/202