RI SOS Filing Number: 202193603820 Date: 3/4/2021 3:55:00 PM



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year:

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R.I. DEPT. OF STATE BUS SYCS DIV

2021 MAR -4 P 3: 53

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.

Г 	I					
1. Entity ID Number	2. Exact name of the Limited Liability Company					
061 668 189	Lake	- on	the Ocean	, 24-		
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
55112	A AM					
5. State of Formation	Holdy compay, Haspide My					
Rhode Island						
6. Principal Office Address			City	State	Zip	
One Rimmond Squar			Providence	KT	02840	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Juke Phelon			Contact Title Perations			
Street Address 43 Spring Street			City Midheld	State	Zip 02052	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name			Manager Name			
Street Address.			Street Address			
City		7in	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. 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 Date					• • • • • • • • • • • • • • • • • • • •	
Take Phelor				315	121	
Signature of Authorized Person						
. /	FILED					

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov