State of Rhode Island Department of State - Business Services Division Annual Report for the year: 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.				APR 1.4 2021		
						Entity ID Number
001694854	DA	DANIESON FARM LLC				
5. State of Formation	\sim I \setminus		character of business conducted in the property	n Rhode Island		
6. Principal Office Address 33 PANS THOIS MD			N. Scit unte	State	^{Zip} 02857	
7. Mailing Address of Limited		ny and Name o	or Title of Contact Person			
Contact Name ERIVA DAN V	2/500		Contact Title Pes 1000	Contact Title Resident Agent		
Street Address 33 PAPID THURS PO			ciny:scaturate	State	^{z1} 82857	
8. List ALL managers (name	s and addresses) of the Limited	Liability Company, IF APPLICAB	LE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
			I	Check the box to	indicate an attachment	
9. The Resident Agent inform	nation currently o	f record with th	ne RI Department of State is accur			

MAIL TO:

Division of Business Services

Name of Authorized Person

Signature of Authorized Person

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

statements, and that all statements contained herein are true and correct.

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