



**State of Rhode Island
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2021

1. ID No. 000121624

2. Exact Name of the Limited Liability Company 345 WALCOTT STREET, LLC

3. State of Formation

State: RI

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

531311

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

OWN AND MANAGE REAL ESTATE.

5. Principal Office Address

No. and Street: 301 ROUTE 17 N

SUITE 406

City or Town: RUTHERFORD

State: NJ

Zip: 07070

Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: JESSIE B. MABASA Contact Title: BOOKKEEPER

No. and Street: 301 ROUTE 17 NORTH, SUITE 406

SUITE 406

City or Town: RUTHERFORD

State: NJ Zip: 07070 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	MYRON P SHEVELL	301 ROUTE 17 N STE 406

		RUTHERFORD, NJ 07070 USA
MANAGER	ZACHARY W. COHEN	301 ROUTE 17 N STE 406 RUTHERFORD, NJ 07070 USA
MANAGER	SUSAN L SHEVELL	301 ROUTE 17 NORTH, SUITE 406 RUTHERFORD, NJ 07070 USA
MANAGER	NANCY SHEVELL MCCARTNEY	301 ROUTE 17 NORTH, SUITE 406 RUTHERFORD, NJ 07070 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 29 Day of April, 2021 at 2:05:22 PM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

By MYRON P. SHEVELL
Signature of Authorized Person

Form No. 632
Revised 09/07

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