RI SOS Filing Number: 202196593100 Date: 5/13/2021 4:00:00 PM



State of Rhode Island

Department of State - Business Services Division

R.I. DEPT. OF STATE BUS SVCS DIV

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

2021 MAY 13 PM 2: 14

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

Entity ID Number					
Pull 1 and 1 and 1	2. Exact name of the Limited Liability Company				
00/1/0/85	- EAN	Ren/14	, LLC		
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
	Commercial & Residential units				
RT (ROMINIC)					
6. Principal Office Address			City	State	Zıp i
184 ATMATIC	Alle	, <u>.</u>	Providence	RI	02907
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name FONCR JESM			Contact Title OWNER		
Street Address IXY ATLANTIC AVC			Providence	State)	Zip 2907
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	State	Zıp	City .	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zıp
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					
Foner JEAN 5/13/21					
Signature of Authorized Person					
	/				

MAIL TO:

Division of Business Services

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

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

FORM 632 - Revised: 08/2020