

Annual Report for the year: 2020 R.I. 0

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

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

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Entity ID Number	2 Event and	no of the Limited	Linkilla Company			
000872401	2. Exact name of the Limited Liability Company Transquit Mater Condons 3, 11, C					
	Tranquil Water Gardens 2, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
238900	Installation and Maintenance of Koi Ponds					
5. State of Formation						
Rhode Island						
6. Principal Office Address	1	<u> </u>	City	State	Zip	
5 East Court			North Kingstown	RI	02852	
7. Mailing Address of Limited Lia	ability Compan	y and Name or T	îtle of Contact Person		1	
Contact Name Brian Almeida			Contact Title President			
Street Address 5 East Court			City North Kingstown	State RI	^{Zip} 02852	
8. List ALL managers (names a	nd addresses)	of the Limited Li	ability Company, IF APPLICABLE	- DO NOT LIST I	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zip	
			.	Check the box to i	ndicate 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 dec statements, and that all staten			amined this report, including a ue and correct.	nny accompanyin	g schedules and	
Name of Authorized Person				Date	Date	
Brian Almeida				May 25, 2021		
Signature of Authorized Person	Al	mis	<i>j</i>	•		

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 C

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