



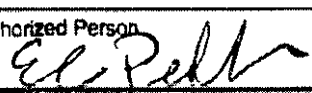
State of Rhode Island
Department of State - Business Services Division

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R.I. DEPT. OF STATE
BUS SVCS DIV

Annual Report for the year: 2012
Limited Liability Company

2021 SEP -2 PM 3:06

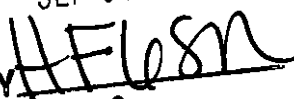
- Filing period: September 1 - November 1
→ Filing Fee: \$50.00
→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 000 156 925		2. Exact name of the Limited Liability Company Tricycle LLC			
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island A rental property of residential dwellings			
5. State of Formation Rhode Island					
6. Principal Office Address 33 11th Street		City Providence		State RI	Zip 02906
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Edward Pepper			Contact Title Member		
Street Address 127 Evergreen St.			City Providence		State RI
			Zip 02906		
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	Zip	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 Edward Pepper				Date 7/21/21	
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

FILED

SEP 02 2021

BY 

A.A. 3:11pm.

FORM 632 - Revised: 08/2020