RI SOS Filing Number: 202100977480 Date: 9/3/2021 4:00:00 PM

State of Rhode Island	
Department of State - Business Services Division	
The state of the s	FILED
Annual Report for the year:	CED W 9 4048
Limited Liability Company	SEP 0 3 2021
Filing period: September 1 - November 1	BY 26 18
 → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by December 1. 	

···						
1. Entity ID Number	2. Exact name of the Limited Liability Company					
000121973	Serond Stony Fres/Ay, LC					
3 MAILS CONS	Brief description of the character of business conducted in Rhode Island					
·····/\ `` /)\\`\\	Then/ Estate politing Co.					
5. State of Formation	1					
RI.			•			
Principal Office Address			City Coeenwide	State	Zip	
655 Main 9	655 Main St.			757	02818	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name PAVID P. IANNUCCIALi			Contact Title Mod WA GO T			
Street Address 655 Maria St.			City E Brancisk	State State	Zip 0281F	
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			
		JE518	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 Date						
DAVID P. IANNUCCITO 9-3-2021						
Signature of Authorized Person & January C. January C.						

MAIL TO:

Division of Business Services

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

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