SEP 0 7 2021

Annual Report for the year: 2021 Limited Liability Company

-> 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 000138095		2. Exact name of the Limited Liability Company KENMARE GROUP, LLC				
3. NAICS Code 531120		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE AND OTHER INVESTMENTS				
5. State of Formation RHODE ISLAND						
6. Principal Office Address			City	State	Zip	
90 PARK AVE - STE 432			FLORHAM PARK	NJ	07932	
7. Mailing Address of Limi	ited Liability Compa	ny and Name or Tit	te of Contact Person			
Contact Name JACK SULLIVAN			Contact Title MEMBER/MANAGING PARTNER			
Street Address 90 PARK AVE - STE 432			City FLORHAM PARK	State NJ	^{Zip} 07932	
8. List ALL managers (na	mes and addresses	s) of the Limited Lia	bility Company, IF APPLICABLE	- DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City Fi Court		Z _{IP} 07932	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
··	1			Check the box to i	indicate an attachment	
9. The Resident Agent info	ormation currently	of record with the RI	Department of State is accurate	e. Changes requir	e filing Form 642.	
Under penalty of perjury statements, and that all			mined this report, including a see and correct.	ny accompanyin	g schedules and	
Name of Authorized Person				Date		
JOHN F SULLIVAN				SEPT 2, 2021		
Signature of Authorized P	Person	<u> </u>	· · · · · • · · · · · ·			

MAIL TO:

Division of Business Services

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

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