RI SOS Filing Number: 202101621850 Date: 9/15/2021 4:00:00 PM



State of Rhode Island

## **Department of State - Business Services Division**

Annual Report for the year: 2021
Limited Liability Company

SEP 1 5 2021

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

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

BYA	391	<u> </u>
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1. Entity ID Number <b>768454</b>		Exact name of the Limited Liability Company     The state of the Limited Liability Company     The state of the Limited Liability Company					
3. NAICS Code 531110		Brief description of the character of business conducted in Rhode Island     OWNERSHIP AND MANAGEMENT OF INVESTMENT REAL ESSTATE					
5. State of Formation RHODE ISLAND							
6. Principal Office Address 16 BUTTERWORTH AVE			City BRISTOL	State RI	Zip 02809		
7. Mailing Address of Limite		any and Name o	T				
Contact Name EDWARD J COX II			Contact Title REGISTERED AGENT				
Street Address 16 BUTTERWORTH AVE			City BRISTOL	State RI	<sup>Z p</sup> 02809		
8. List ALL managers (nam	nes and addresse	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS		
Manager Name			Manager Name				
Street Address			Sirect Address	Street Address			
City	State	Zip	City	State	Zip		
. Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
<u></u>	<del>!</del>			Check the box to	indicate an attachment		
9. The Resident Agent info	rmation currently	of record with th	e RI Department of State is acc	urate. Changes requi	ire filing Form 642.		
Under penalty of perjury, statements, and that all s			examined this report, includi	ng any accompanyi	ng schedules and		
Name of Authorized Person			Date	Date			
EDWARD J COX II				09/12/	09/12/2021		
Signature of Authorized Pe	1.4						

MAIL TO:

**Division of Business Services** 

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

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