RI SOS Filing Number: 202102008920 Date: 9/22/2021 4:00:00 PM



State of Rhode Island

Department of State - Business Services Division

FILED

SEP 2.2 7

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 000099873	2. Exact name of the Limited Liability Company C.I.A., LLC				
3 NAICS Code 531110	Brief description of the character of business conducted in Rhode Island Residential real estate rentals				
5. State of Formation RI					
6. Principal Office Address			City	State	Zip
1580 Wampanoag Trail, #200E			Barrington	RI	02806
7. Mailing Address of Limited Lia	ibility Company	y and Name or Tit	le of Contact Person	•	·
Contact Name Christopher E. Cuzzone			Contact Title Operating Manager		
Street Address 25 Knapton St.			City Barrington	State RI	^{Z:p} 02806
8. List ALL managers (names a		of the Limited Lia			
Manager Name Christopher E. Cuzzone			Manager Name John F. Cuzzone, III		
Streef Address 25 Knapton St.			Street Address 12 Pine Cone Dr.		
^{City} Barrington	State RI	^{Zip} 02806	City Barrington	State RI	^{Zip} 02806
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zıp
Check the box to indicate an attach					
9. The Cosident 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				ng any accompanyin	g schedules and
Name of Authorized Person				Date	
Christopher E. Cuzzone				09/16/21	
Signature of Authorized Person	Cox	1~			
	T				

MAIL TO:

Division of Business Services

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

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