

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.

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				D1	4-13-10		
Entity ID Number	l l	2. Exact name of the Limited Liability Company					
1077774	710 Ti	710 Tiogue Avenue, LLC					
3. NAICS Code	4. Brief des	Brief description of the character of business conducted in Rhode Island					
531110	To engage	To engage in any and all lawful business activities, including but not limited to Real Estate					
5. State of Formation	Developm	ent.			· · ·		
Rhode Island					•		
6. Principal Office Address	 }		City	State	Zıp		
312 Murphy Road			Hartford	ст	06114		
7. Mailing Address of Limit		any and Name o		,	*		
Contact Name Joseph Sullo			Contact Title Manager				
Street Address 312 Murphy Road			City Hartford	State CT	^{Zip} 06114		
8. List ALL managers (nar	mes and addresse:	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zıp		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zıp	City	State	Zıp		
				Check the box to	indicate an attachment		
9. Resident Agent in Rhod	le Island This inform	nation is currently	of record with the Department of S	tate. Changes require fili	ing Form 642.		
Under penalty of perjury statements, and that all	, I declare and aff statements conta	irm that I have ined herein are	examined this report, includi true and correct.	ing any accompanyii	ng schedules and		
Name of Authorized Perso	on			Date	1,- 1-		
Joseph Sullo				09	/17/21		
Signature of Authorized Pe	ersty V	, 910	N DOCUMENT HERE		7		

MAIL TO:

Division of Business Services

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

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