Date: 9/27/2021 9:44:00 AM RI SOS Filing Number: 202102148860



State of Rhode Island

Department of State - Business Services Division /CS DIV

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Annual Report for the year: 2020 **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 000943944	2. Exact name of the Limited Liability Company 901 Waterman Avenue, LLC					
3. NAICS Code						
531110	4. Brief description of the character of business conducted in Rhode Island					
	To own, manage, develop, maintain, rehabilitate, renovate, finance, operate, lease, sell, convey, assign, mortgage or otherwise deal with such properties as the LLC may acquire from					
5. State of Formation RI	time to time and to carry on any lawful business, trade, purpose or activity.					
6. Principal Office Address			City	State	Zip	
901 Waterman Avenue			East Providence	RI	02914	
7. Mailing Address of Limited Lia		and Name or Tit				
Contact Name Christopher Pereira			Contact Title Manager			
Street Address 54 Mason Street			City Worcester	State MA	^{Zip} 01610	
8. List ALL managers (names a		of the Limited Lial	bility Company, IF APPLICAB	LE - DO NOT LIST N	IEMBERS	
Manager Name Christopher Pereira			Manager Name			
Street Address 54 Mason Street			Street Address			
City Worcester	State MA	Zip 01610	City	State	Zıp	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zıp	
	<u>. </u>		<u> </u>	Check the box to in	ndicate an attachment	
9. The Resident Agent informati	on currently of r	ecord with the RI	Department of State is accur	ate. Changes require	filing Form 642.	
Under penalty of perjury, I dec statements, and that all states				any accompanying	schedules and	
Name of Authorized Person				Date	1	
Christopher Pereira				5-30-21		
Signature of Authorized Person	fun					

MAIL TO:

Division of Business Services

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

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

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FORM 632 - Revised: 08/2020