



State of Rhode Island

Department of State - Business Services Division

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.

FILED
STAMP

SEP 27 2021

BY

1103
[Signature]

1. Entity ID Number 000522559		2. Exact name of the Limited Liability Company 45 COMMERCE, LLC			
3. NAICS Code 531120		4. Brief description of the character of business conducted in Rhode Island <i>real estate</i>			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 50 WHITECAP DRIVE, SUITE 102		City NORTH KINGSTOWN		State RI	Zip 02852
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name DOUGLAS B. RIGGS		Contact Title			
Street Address 50 WHITECAP DRIVE, SUITE 102		City NORTH KINGSTOWN		State RI	Zip 02852
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name DOUGLAS B. RIGGS		Manager Name			
Street Address 50 WHITECAP DRIVE, SUITE 102		Street Address			
City NORTH KINGSTOWN	State RI	Zip 02852	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Check the box to indicate an attachment ☐					
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Person DOUGLAS B. RIGGS				Date 09/22/2021	
Signature of Authorized Person <i>[Signature]</i>					

MAIL TO:

Division of Business Services

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