RI SOS Filing Number: 202102818330 Date: 10/6/2021 4:00:00 PM



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						
OCH 0 6 2021						
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1. Entity ID Number	2. Exact nan	2. Exact name of the Limited Liability Company				
1663926	THE 579 LL	THE 579 LLC				
3. NAICS Code	4. Brief desc	4. Brief description of the character of business conducted in Rhode Island				
722511	Restaurant	Restaurant				
5. State of Formation						
Rhode Island						
6. Principal Office Address			City	State	Zip	
56 South Eaglenest Drive			Lincoln	RI	02865	
7. Mailing Address of Limited L	iability Compan	y and Name or Tit	le of Contact Person			
Contact Name Alfred K. Castiglioni			Contact Title			
Street Address 56 South Eaglenest Drive			City Lincoln	State RI	Zip 02865	
8. List ALL managers (names		of the Limited Lia	bility Company, IF APPLIC	ABLE - DO NOT LIST N	IEMBERS	
Manager Name Alfred K. Castiglioni			Manager Name			
Street Address 56 South Eaglenest Drive			Street Address	Street Address		
City Lincoln	State RI	Zip 02865	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zıp	
<u>-</u>				Check the box to in	ndicate an attachment	
9. The Resident Agent informa	tion currently of	record with the R	Department of State is ac	curate. Changes require	filing Form 642.	
Under penalty of perjury, I de statements, and that all state				ling any accompanying	schedules and	
Name of Authorized Person Date / /						
Alfred K. Castiglioni $ \partial/\mathcal{L} _{21}$						
Signature of Authorized Person	n					
M/M						

MAIL TO:

Division of Business Services

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

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