

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							
	OCT 07 2021						
BY_	1069						

4 5-44-15 N	10.5			`			
1. Entity ID Number 1677197	I	2. Exact name of the Limited Liability Company					
10//19/	380 LIO	380 Lloyd Avenue, LLC					
3. NAICS Code	4. Brief de	Brief description of the character of business conducted in Rhode Island					
531390	Managen	Management of Real Estate					
5. State of Formation							
RI							
6. Principal Office Address			City	Slate	Zip		
129 Hazard Avenue			Providence	RI	02906		
7. Mailing Address of Limited		any and Name o					
Contact Name Steven Graff			Contact Title Member				
Street Address 129 Hazard A	Avenue		City Providence	State RI	^{Zip} 02906		
8. List ALL managers (name	s and addresse	s) of the Limited	Liability Company, IF APPLICAE	BLE - DO NOT LIST (MEMBERS		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Manager Name		-	Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
·				Check the box to i	ndicate an attachment		
9. The Resident Agent inform	nation currently	of record with the	e RI Department of State is accu				
Under penalty of perjury, I	declare and aff	irm that I have	examined this report, including				
statements, and that all sta	atements conta	ined herein are	true and correct.				
Name of Authorized Person		Date					
Circuit as at 1 th the circuit							
Signature of Authorized Pers	son						

MAIL TO:

Division of Business Services

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

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