RI SOS Filing Number: 202103007940 Date: 10/8/2021 4:00:00 PM



State of Rhode Island

Department of State - Business Services Division

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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.

Entity ID Number	2. Exact name of the Limited Liability Company				
409540	62 Spruce Street, LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
531190	Acquiring, developing, owning, leasing, mortgaging, managing, operating, selling and				
5 State of Formation	otherwise disposing of real estate.				
Rhode Island					
Principal Office Address			City	State	Zıp
296 George Washington Highway			Smithfield	RI	02917
7 Mailing Address of Limited Lia	bility Company	y and Name or Titl	e of Contact Person		
Contact Name Richard J. Conti			Contact Title		
Street Address 296 George Washington Highway			City Smithfield	State RI	^{Z₁p} 02917
8 List ALL managers (names a		of the Limited Liat	oility Company, IF APPLICA	BLE - DO NOT LIST I	MEMBERS
Manager Name Richard J. Conti			Manager Name		
Street Address 296 George Washington Highway			Street Address		
^{City} Smithfield	State RI	^{Zip} 02917	City	State	Zıp
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zıp	Crty	State	Žip
				Check the box to	ndicate 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 dec statements, and that all stater	lare and affiri nents contain	n that I have exa ed herein are tru	mined this report, includir e and correct.	ng any accompanyin	g schedules and
Name of Authorized Person				Date	
Richard J. Conti				9-30	0-2021
Signature of Authorized Person					

MAIL TO:

Division of Business Services

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

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

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