



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

OCT 15 2021

BY

OS

1. Entity ID Number 001713334		2. Exact name of the Limited Liability Company VAL-GIN, LLC			
3. NAICS Code 531311		4. Brief description of the character of business conducted in Rhode Island Real Estate Management			
5. State of Formation RI					
6. Principal Office Address 157 Central Pike			City Foster	State RI	Zip 02825
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Stephen J. DiGianfilippo			Contact Title Attorney		
Street Address 50 Park Row West, Suite 111			City Providence	State RI	Zip 02903
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Patricia J. Moreau			Manager Name		
Street Address 157 Central Pike			Street Address		
City Foster	State RI	Zip 02825	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.					
<i>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.</i>					
Name of Authorized Person Patricia J. Moreau				Date 10/6/2021	
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