



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 20551
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 <i>Patricia J. Moreau</i>					

MAIL TO:
 Division of Business Services
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