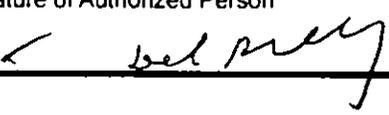State of Rhode Island
Department of State - Business Services Division

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2021 OCT 20 P 1: 13

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.

1. Entity ID Number **001697990**	2. Exact name of the Limited Liability Company **Abigail Enterprises, LLC**			
3. NAICS Code 531390	4. Brief description of the character of business conducted in Rhode Island Real estate and related matters, and all other matters allowed under Rhode Island law.			
5. State of Formation Rhode Island				

6. Principal Office Address 35 Abigail Road	City Cumberland	State RI	Zip 02864

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name Daniel Brady	Contact Title Authorized member		
Street Address 35 Abigail Road	City Cumberland	State RI	Zip 02864

8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - 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 indicate 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 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.

Name of Authorized Person Daniel Brady	Date October 1, 2021

Signature of Authorized Person

[signature]

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FILED

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