State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2020

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	2. Exact name of the Limited Liability Company
1[illegible]885	COCE LLC
3. NAICS Code: 531110	4. Brief description of the character of business conducted in Rhode Island: Rental Real Estate Two 2 family houses
5. State of Formation: R.I.	

6. Principal Office Address	City	State	Zip
433 Benefit St.	Providence	RI	02903

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

Contact Name	Contact Title
Charles Cudworth	Manager - Co-owner

Street Address	City	State	Zip
433 Benefit St Prov. RI 02903	Providence	RI.	02903

8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - **DO NOT LIST MEMBERS**

Manager Name	Street Address	City	State	Zip
Charles Cudworth	433 Benefit St.	Prov	RI	02903
Janet Levine	433 Benefit St.	Prov	RI	02903
Manager Name	Street Address	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	Date
Charles Cudworth	11/2/20

Signature of Authorized Person: Charles Cudworth

where were unmarried

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

Filed 11/5/20
Check # 1081