State of Rhode Island

Department of State - Business Services Division COLVED R.J. DEPT. OF STATE BUS SYOS BLV

STAMP

Annual Report for the year: 2021 **Limited Liability Company**

2021 MOV - 1 AM 8: 40

→ 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				
000116005	THE AGENCY PAIVA, LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
524210	INSURANCE & REAL ESTATE SALES				
5. State of Formation	1				
RHODE ISLAND					
6. Principal Office Address			City	State	Zio
194 WARREN AVENUE			EAST PROVIDENCE	RI	02914
7. Mailing Address of Limited Lia		and Name or Tit		·	.
Contact Name JOSEPH E PAIVA			Contact Title MEMBER		
Street Address 194 WARREN AVENUE			City EAST PROVIDENCE	State RI	^{Zip} 02914
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name JOSEPH E PAIVA			Manager Name		
Stree: Address 194 WARREN AVENUE			Street Address		
City EAST PROVIDENCE	State RI	^{Zip} 02914	City	State	Zıp
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zıp	City	State	Zıp
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 penury, I dec statements, and that all staten			mined this report, including any e and correct.	accompanyin	g schedules and
Name of Authorized Person				Date	02 0401
JOSEPH E PAINA				10.	27-2021
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 FILED

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