



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.

F. D.

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BY

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FOR
SECRETARY OF STATE
USE ONLY

1. Entity ID Number 001699794		2. Exact name of the Limited Liability Company 1427 Hartford, LLC			
3. NAICS Code 531390		4. Brief description of the character of business conducted in Rhode Island Lease, sell, convey, manage real estate investments			
5. State of Formation Rhode Island					
6. Principal Office Address 528 Smithfield Road, Unit 310		City North Providence		State RI	Zip 02904
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Heather Charnley			Contact Title Financial Consultant		
Street Address 528 Smithfield Road, Unit 310		City North Providence		State RI	Zip 02904
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 Heather Charnley				Date 10/29/2021	
Signature of Authorized Person <i>Heather Charnley</i>					

MAIL TO:

Division of Business Services

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