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State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2019
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		
000304520	RLB LLC		
3. NAICS Code: 364131	4. Brief description of the character of business conducted in Rhode Island: INVESTMENT PROPERTY		
5. State of Formation: RI			
6. Principal Office Address: 99 KETTLE POND DRIVE	City: WAKEFIELD	State: RI	Zip: 02879
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name: WAYNE LABORE	Contact Title: MEMBER		
Street Address: SAME AS ABOVE	City	State	Zip
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: WAYNE LABORE	Date: 10/29/2021		
Signature of Authorized Person: Wayne A. LaBore			

FILED
NOV 05 2021
BY 457YA
12:25

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

FORM 632 - Revised: 08/2020