

State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

RI. DEP STATE
BUS SYCS NOTE

2021 NOV 25 PH 1:41

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	2. Exact name of the Limited Liability Company				
001703862	Providence Apartments 101, CC				
3. NAICS Code .	4. Brief description of the character of business conducted in Rhode Island				
999999	1				
5. State of Formation	Real Estate Investment Vehicle				
RI				•	
6. Principal Office Address			City	State	7 in
10 Wybusset Street			Providence	RI	Zip   07903
7. Mailing Address of Limited Lia	bility Comp	any and Name or Titl	e of Contact Person		
Contact Name TEFF Havingst.			Contact Title Member		
Street Address 4 Wildeness Trail			City Warren	State NJ	Zip 07059
8. List ALL managers (names ar	nd addresse	s) of the Limited Liab	oility Company, IF APPLICAB	LE - DO NOT LIST	MEMBERS
Manager Name JEFF Harmatz			Manager Name		
Street Address 4 Wilderhoss Trail			Street Address		
City Worren	State	2ip 07059	City	State	Zip
Manager Name	·		Manager Name		
Street Address			Street Address		
City	Ta	<del></del>			<u></u>
	State	Zip	City	State	Zip
			<del></del>	Check the box to	indicate an attachment
9. Resident Agent in Rhode Islan	id. This Infon	nation is currently of re	cord with the Department of Sta	le Channes require fil	ing Form 642
statements, and that all staten	iare and afi ients conta	firm that I have examined herein are true	mined this report includes	g any accompanyi	ng schedules and
Name of Authorized Person	-60	1/2 1		Date	, ,
Name of Authorized Person Jeff Harmatz  Date  Date					
Signature of Authorized Person 11/1/9/2/					
	1//		10		

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov 自江河

3v 2021 PO8M2