	State of Rhode Office of the Secreta		Fee: \$50.00
Division Of Business Services			
148 W. River Street			
HORE	Providence RI 0290 (401) 222-30		
Limited Liability Com Annual Report	pany		
Filing Period: September 1	- November 1		
	7-16-66(d), each limited liability com		
to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7- 16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2021			
1. ID No. <u>000870757</u>			
2. Exact Name of the Limited Liability Company <u>KLM WASHINGTON, LLC</u>			
3. State of Formation			
State: <u>RI</u>			
Enter the site disite NATOO Or do that beet does the stime as business and ustad by the setting Developed			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
521200			
<u>531390</u>			
4. Brief Description of th	e Character of the Business Which	is Actually Conducted	I in Rhode Island
REAL ESTATE OWNERSHIP, SALES, RENTAL AND MANAGEMENT			
5. Principal Office Addre	SS		
	REDERICK STREET		
City or Town: <u>QUIR</u>	NCY State	: <u>MA</u> Zip: <u>02169</u>	Country: <u>USA</u>
6. Mailing Address of Lir	nited Liability Company and Name	e or Title of Contact Pe	rson:
Contact Name: Contact	Title:		
	EDERICK STREET		
City or Town: QUIN	<u>or</u> State	e: <u>MA</u> Zip: <u>02169</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Addre	ess
	First, Middle, Last, Suffix	Address, City or Town, St	
MANAGER	CHRISTOPHER LOPES	15 FREDER QUINCY, MA (	RICK STREET 02169 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

EDWARD F. GROURKE, ESQ. 24 SPRING ST. PAWTUCKET , RI 02860

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 30 Day of November, 2021 at 5:09:33 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

## By CHRISTOPHER LOPES

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2021 State of Rhode Island All Rights Reserved