State of Rhode Island and Providence Plantations
Department of State - Business Services Division

STAMP

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
00168477	30 RODMAN, LLC
3. NAICS Code: 531390	4. Brief description of the character of business conducted in Rhode Island: THE PURCHASE, HOLDING, LEASING AND SALE OF RESIDENTIAL, COMMERCIAL AND MIXED PARCELS OF REAL ESTATE.
5. State of Formation: RHODE ISLAND	

6. Principal Office Address	City	State	Zip
130 TOWER HILL ROAD	NORTH KINGSTOWN	RI	02852

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name	Contact Title		
SKYCAP, LLC	MANAGER		
Street Address: 67 FAIRMONT AVENUE	City: STAMFORD	State: CT	Zip: 06906

8. List **ALL** managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - **DO NOT LIST MEMBERS**

Manager Name			Manager Name		
SKYCAP, LLC					
Street Address: 67 FAIRMONT AVENUE			Street Address		
City: STAMFORD	State: CT	Zip: 06906	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. Resident Agent in Rhode Island. This information is currently of record with the Department of State. 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	Date
JONATHAN D. HIERL, MEMBER	11/22/21
Signature of Authorized Person: SIGN DOCUMENT HERE	

FILED
NOV 30 2021
BY Ch. Ck # 5401

MAIL TO:
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