State of Rhode Island
Department of State - Business Services Division

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Annual Report for the year: 2017
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		
000575366	BMF LLC		
3. NAICS Code: 531210	4. Brief description of the character of business conducted in Rhode Island: REAL ESTATE AGENT AND BROKER		
5. State of Formation: RI			
6. Principal Office Address: 57B SHORE ROAD	City: WESTERLY	State: RI	Zip: 02891
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name: BENJAMIN FAUBERT	Contact Title: MEMBER		
Street Address: 57B SHORE ROAD	City: WESTERLY	State: RI	Zip: 02891

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	Date
BENJAMIN FAUBERT	12/10/21

Signature of Authorized Person

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

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