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Department of State - Business Services Division

Annual Report for the year: 2021 Limited Liability Company

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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DEC 2 8 2021
BY

Entity ID Number	2. Exact name of the Limited Liability Company				
001663875	I+ Takes Two.11				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
53 I I I O 5. State of Formation	3 Apartment S	Rental House			
6. Principal Office Address		City	State	Zip	
8 Bridgeport Road Rear Tiverton			RI	02878	
7 Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Todanie A. Chenry City State Zin					
Street Address 8 Bridgeport Road Rear		City Tiverton	State RI	Zip 02878	
8. 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		
Toddnie A. Cherry			12-22-2021		
Signature of Authorized Person					
To a. Cuy					

MAIL TO:

Division of Business Services

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

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