

Annual Report for the year: 2022 **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.

	FILED
	APR 1 8 2022
BY	-)07
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Entity ID Number	Entity ID Number 2. Exact name of the Limited Liability Company					
000152890 36 EXCHANGE TERRACE LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
531110	ROM ESTATE					
5. State of Formation						
RI						
6. Principal Office Address		City	State	Zip		
36 EXCHMGE TENNACE		FROM DETRE	RI	0.903		
7. Mailing Address of Limited Lia	ability Company and Name or Tit	le of Contact Person				
Contact Name Ach Acc	(4197.	Contact Till 40 46 Ex				
Streak Address SCOKCHANGE 16		PANDECE	State Z	Z1p 29 U3		
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 ACK ACKINITY. Date 1/13/27						
Signature of Authorized Person	4147		/ /	-		

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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