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Department of State - Business Services Division

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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.

1. Entity ID Number	2 Evact name of the Limite of Lie	A TIMA . O		
i .	2. Exact name of the Limited Liability Company			
001684734	Universal Home 5 LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island (2 AC さらん) (という) とくと (3 AS) (7)			
531110				
5. State of Formation	1			
RI				
6. Principal Office Address		City	State	Zip
42 MADISON ST		PRONDENCE	RI	07907
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name LICHIPSE VELOTIQUEZ		Contact Title MANAGER		
Street Address 42 UADISON ST		City PROVIDENCE	State	Zip 0 290 7
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 /	
MICHAGE VELARQUER			4/20/2071	
Signature of Authorized Person				
-althou				

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MAIL TO:

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

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