		e of Rhode Isla the Secretary o		Fee: \$50.00
	Divisio	n Of Business Serv	vices	
148 W. River Street				
Providence RI 02904-2615 (401) 222 2040				
HOPE	(	401) 222-3040		
Limited Liabilit	y Company			
Annual Report Filing Period: Febru	any 1 - May 1			
, in the second s				
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-				
16-66(b&c)) is subject to a penalty fee of \$25.00.				
ANNUAL REPOR	YEAR: <u>2022</u>			
1. ID No. <u>00</u>	724308			
2. Exact Name of the Limited Liability Company 553 Hope St., LLC				
3. State of Form	ation			
State: <u>RI</u>				
		ARTICLE III		
•	NAICS Code that best describe ere. More information on <u>NAICS</u>			the entry. Download
4. Brief Descripti	on of the Character of the Bu	siness Which is A	ctually Conduct	ed in Rhode Island
LESSOR OF NO	NRESIDENTIAL REAL ES	TATE		
5. Principal Offic	e Address			
No. and Street:	41 GRAYLOCK ROAD			
City or Town:	BRISTOL	State: <u>RI</u>	Zip: <u>02809</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name:	KENNETH MARSHALL Contact	Title:		
No. and Street:	41 GREYLOCK ROAD			
City or Town:	<u>5TH FLOOR</u> <u>BRISTOL</u>	State: <u>RI</u>	Zip: <u>02809</u>	Country: <u>USA</u>
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11				
	IMITT, LTD. 56 EXCHANGE TE		<u>ENCE</u> , <u>RI</u> <u>02903</u>	3
0 This second	at he avaanted her an and			40.00 (b)
o. This report mu	ist be executed by an authori	∠ea person pursu	ant to K.I.G.L. /-	(D).

## **Signed this 11 Day of July, 2022 at 11:21:38 AM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

## By <u>ROBERT SCHMITT</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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