RI SOS Filing Number: 202325692560 Date: 1/5/2023 4:00:00 PM

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Annual Report for the year: **Limited Liability Company**

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→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

4 5-44-15 11 -1						
1. Entity ID Number	2. Exact name of the Limited Lia					
DD1671810	205 Valle	y Street	260			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
53 110 5. State of Formation	Rental Propert	Property Ad 325 Valle Providence	dress: y street	 <i>৩</i> ণ		
6. Principal Office Address		City	State	Zip		
28 Cathedra	1 Avenue	Providence	RI	02908		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Libania X Rodriguez Contact Title ONNORY						
Street Address Libania Y. R 28 Cathedral Awnu	odrisuez/ - Z	cin Papridence	State	zip 290 8		
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	<u> </u>		
Libania X. Rodriguez		3/2/2022				
Signature of Authorized Person						

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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