

R.I. DEPT. OF STATE BUS SYCS DIV

2023 JAN 27 PM 2: 21

**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. Exact name of the Limited Liability Company			
0607-97100	Calvez, LLC			
3. NAICS Code	Brief description of the character of business conducted in Rhode Island     *			
531110				
5. State of Formation	Real estate			
.00	<u>.</u> .			
KT.	<u> </u>			
6. Principal Office Address		City	State	Zip
62 Dodge Street Block		BlockIsland	RI	02807
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Reperca Zendt		Contact Title		
Street Address Box 1387		Book-15/and	State	Zip 6280.7_
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	
Rebecca Zendt			1/24/23	
Signature of Authorized Person				
Randel				

FILED JAN **27** 202**3** 

MAIL TO:

**Division of Business Services** 

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

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