

\$777.3

Annual Report for the year: 2013**Limited Liability Company**

FEB 0 6 2023 O

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

Entity ID Number	2. Exact name of the Limited Liability Company			
· ·				
001723243	Mokawk LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
1 EZ1.41U	Real estate at 103 Mohawk Trail, Charlestown Rt			
1001				
State of Formation				
QF				
6. Principal Office Address		City	State	Zip
30 Cherokee Band		Charlestown	RI	09813
7. Mailing Address of Limited Lia	bility Company and Name or Title	of Contact Person		
M. Christine Bano, +		Contact Title CD~のいんで		
Street Address 30 Cherokee Band		Charlesto wn	State R I	zip 07813
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 ,	,
M. Christine Benoit			2/2	12023
Signature of Authorized Person				
M. Ate Beno, T				

MAIL TO:

Division of Business Services

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

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