RI SOS Filing Number: 202328841000 Date: 2/17/2023 4:00:00 PM



State of Rhode Island

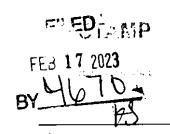
Department of State - Business Services Division

Annual Report for the year: $\frac{2023}{}$ **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.



Entity ID Number	2. Exact name of the Limited Liability Company				
001702663	Waterman Chena	Waterman Chenago LLC			
3. NAICS Code 531110	Brief description of the character of business conducted in Rhode Island Own and Operate Real Estate				
5. State of Formation Rhode Island					
6. Principal Office Address		City	State	Zip	
41 Shepard Avenue		Providence	RI	02904	
7. Mailing Address of Limite	ed Liability Company and Name o			·	
Contact Name Salvatore Compagnone		Contact Title Member			
Street Address 41 Shepard Avenue		City Providence	State RI	^{Zip} 02904	
8. The Resident Agent info	mation currently of record with the	e RI Department of State is accur-	ate. Changes requir	e filing Form 642.	
	I declare and affirm that I have tatements contained herein are	examined this report, including true and correct.	any accompanyin	g schedules and	
Name of Authorized Person	1		Date		
Salvatore Compagn	one		1 21	14/23	
Signature of Authorized Pe	rson				

MAIL TO:

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

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