

Annual Report for the year: 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.

FILED STAMP

FEB 24 2023

BY 334

Entity ID Number	2. Exact name of the Limited Liability Company			
112215	Inglenook, LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
531110	To acquire, own, lease and/or otherwise deal with certain real estate			
5. State of Formation				
RI				
6. Principal Office Address	Cit	ty	State	Zip
34 Anthony Street	So	uth Dartmouth	MA	02748
	d Liability Company and Name or Title of C	Contact Person		1
Conlact Name Michael Lahti	Co	Contact Title		
Street Address 34 Anthony S	Street	y South Dartmouth	State MA	Zip 02748
8. The Resident Agent infor	mation currently of record with the RI Depa	rtment of State is accura	ite. Changes require	filing Form 642.
Under penalty of perjury, statements, and that all s	l declare and affirm that I have examined tatements contained herein are true and	d this report, including correct.	any accompanying	g schedules and
Name of Authorized Person Michael Lahti			Date	
				1-2023

MAIL TO:

Division of Business Services

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

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