

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.

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1. Entity ID Number	2. Exact name of the Limited Liability Company RFP, LLC 4. Brief description of the character of business conducted in Rhode Island Real Estate			
3. NAICS Code 531390				
5. State of Formation				
6. Principal Office Address		City	State	Zip
337 Thames Street		Newport	RI	02840
7. Mailing Address of Limited L	iability Company and Name or	Title of Contact Person	<u> </u>	<u> </u>
Contact Name Lawrence S. Phillips		Contact Title Member		
Street Address 334 Knight Street Suite 11201		City Warwick	State RI	^{Zip} 02886
		RI Department of State is accu	rate. Changes require	e filing Form 642.
Under penalty of perjury, I do statements, and that all state	eclare and affirm that I have ements contained herein are	examined this report, including true and correct.	g any accompanyin	g schedules and
Name of Authorized Person Russell J Dulise			Date	
Signature of Authorized Derson	elen			

MAIL TO:

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

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