State of Rhode Island

Department of State - Business Services Division

R.A. DEPT. OF STATE

Annual Report for the year: _Limited Liability Company

2020.

2023 HAR 10 A 11: 49

→ 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			
001662251	SLEON INVESTMENT. LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
36116				
5. State of Formation	100			
KI	CONSTRUCTION			
6. Principal Office Address		City	State	Zip
115 W1150n St		proudonce	RI	02907
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name 50 SP LCO.		Contact Title		
Street Address		con dere	State	2ip 02907
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	
Deul		3/10/23		
Signature of Authorized Person				
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FILED

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov MAR 10 2023

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