RI SOS Filing Number: 202331081400 Date: 3/16/2023 4:00:00 PM

State of Rh Departm		State of Rh Departn
------------------------	--	----------------------

ode Island

nent of State - Business Services Division

2023

FILED

MAR 16 2023

3×1202

STATE

Annual Report for the year: **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.

1. Entity ID Number	2. Exact name of the Limited Liability Company					
1671069	28 ALBION, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
531120	ownership and development of real property					
5. State of Formation	-					
Rhode Island						
6. Principal Office Address	[0	Dity	State	Zip		
90 Douglas Pike		Smithfield	RI	02917-0000		
7. Mailing Address of Limite	d Liability Company and Name or Title o	Contact Person	•			
Contact Name Paul T. Surabian		Contact Title Manager				
Street Address 90 Douglas Pike		Smithfield	State R1	Zip 02917-0000		
8. The Resident Agent infor	mation currently of record with the RI De	partment of State is accur	rate. Changes require	e filing Form 642.		
	l declare and affirm that I have examin tatements contained herein are true ar	• • •	g any accompanyin	g schedules and		
Name of Authorized Person	e of Authorized Person		Date			
Paul T. Surabian		Manager January 2, 2023		uary 2, 2023		
Signature of Authorized Per			<u></u>			
Signature of Authorized Per						

MAIL TO:

Division of Business Services

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

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