



State of Rhode Island  
**Department of State - Business Services Division**

**FILED STAMP**  
 MAR 20 2023  
 BY *[Signature]*  
*[Signature]*

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.

1. Entity ID Number 1660388		2. Exact name of the Limited Liability Company 562 Hope LLC		
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island Purchasing, leasing and sale of real estate		
5. State of Formation Rhode Island				
6. Principal Office Address PO Box 401		City Cumberland	State RI	Zip 02864
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name David Piccoli, II		Contact Title Member		
Street Address PO Box 401		City Cumberland	State RI	Zip 02864
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
<i>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.</i>				
Name of Authorized Person David Piccoli, II			Date 3/10/2023	
Signature of Authorized Person <i>[Signature]</i>				

**MAIL TO:**  
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