State of Rhode Island

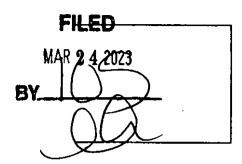
Department of State - Business Services Division

Annual Report for the year: Zimited 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.



3. NAICS Code 4. Brief description of the character of business conducted in Rhode Islands	nd		
	3. NAICS Code 4. Brief description of the character of business conducted in Rhode Island		
531110			
5. State of Formation			
FL RENTAL REAL			
6. Principal Office Address City	State	Ζip	
16326 GULF BLVD APT 106 REDINGTON BEA	CH FL	33708	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Title			
steer Adverse (a GULT PUCK BON INCH	PAN State	Zp253708	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filling 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 LOKOS	Date 3	23/2023	
Signature of Authorized Person			

MAIL TO:

Division of Business Services

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

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