

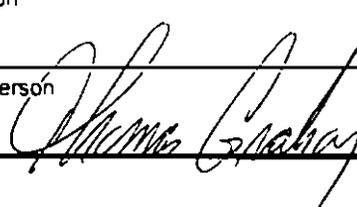


State of Rhode Island
Department of State - Business Services Division

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 R.I. DEPT. OF STATE
 BUS SVCS DIVISION
 2023 APR 13 A 10:36

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 001707340		2. Exact name of the Limited Liability Company WALDEN RI, LLC	
3. NAICS Code 531390		4. Brief description of the character of business conducted in Rhode Island Any lawful business, unless a more limited purpose is adopted by amendment to the Articles of Organization and/or the operating agreement.	
5. State of Formation Rhode Island			
6. Principal Office Address 4 Clinton Square		City Syracuse	State NY
Zip 13202			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Thomas Graham		Contact Title Authorized Person	
Street Address c/o Pyramid Companies, 4 Clinton Square		City Syracuse	State NY
Zip 13202			
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 Thomas Graham		Date 4/12/2023	
Signature of Authorized Person 			

FILED
 APR 13 2023
 BY ML 13295

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov