	State of Rhode Island Fee: \$50.0
	Office of the Secretary of State
	Division Of Business Services
	148 W. River Street
	Providence RI 02904-2615
7636	(401) 222-3040
Limited Liability	/ Company
Annual Report	
Filing Period: Febr	ruary 1 - May 1
refusing to file its a	h R.I.G.L. 7-16-66(d), each limited liability company failing or annual report within thirty (30) days after the time prescribed by -66(b&c)) is subject to a penalty fee of \$25.00.
ANNUAL REPOR	T YEAR: <u>2023</u>
1. ID No. <u>001</u>	<u>693595</u>
2. Exact Name o	of the Limited Liability Company <u>EASTON POINT, LLC</u>
3. State of Forma	ation
State: <u>RI</u>	
	ARTICLE III
Download the list	t NAICS Code that best describes the primary business conducted by the entity. t of codes <u>here.</u> More information on <u>NAICS</u> can be found online.
<u>721310</u>	
4. Brief Descripti Island	ion of the Character of the Business Which is Actually Conducted in Rhode
RENTAL PROPI	ERTY SERVICE
5. Principal Offic	ce Address
No. and Street:	2308 MT VERNON AVE
City or Town:	<u>SUITE 415</u> <u>ALEXANDRIA</u> State: <u>VA</u> Zip: <u>22301</u> Country: <u>USA</u>
	ss of Limited Liability Company and Name or Title of Contact Person:
Contact Name: (	
No. and Street:	2308 MT VERNON AVE
City or Town:	ALEXANDRIA State: VA Zip: 22301 Country: USA
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11	

## MARK B. BARDORF 36 WASHINGTON SQUARE NEWPORT , RI 02840

## 8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 20 Day of April, 2023 at 3:59:37 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

By SEAN SPICER

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2023 State of Rhode Island All Rights Reserved