Annual Report for the year:  $\frac{2023}{}$ **Limited Liability Company** 

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- → Filing period: February 1 May 1 → Filing Fee: \$50.00
- → Penalty: Additional \$25.00 fee if form is not filed by May 31.

Entity ID Number	2. Exact name of the Limited Liability Company			
139598	AMT Holdings, LLC			
3. NAICS Code	Brief description of the character of business conducted in Rhode Island			
531390	Buying, selling, leasing and holding and/or retaining real property			
5. State of Formation				
Rhode Island				
6. Principal Office Address		City	State	Zip
260 West Exchange Street, Suite 003		Providence	RI	02903
7. Mailing Address of Limited	Liability Company and Name	or Title of Contact Person		
Contact Name Kevin M. Daley, Esq.		Contact Title Attorney		
Street Address 1383 Warwick Avenue		City Warwick	State RI	Zip 02888
8. The Resident Agent inform	nation currently of record with	the RI Department of State is acc	curate. Changes requir	e filing Form 642.
	declare and affirm that I have tements contained herein a	re examined this report, including true and correct.	ng any accompanyin	g schedules and
Name of Authorized Person			Date	
ANTHONY M. TARRO			4.7.23	
Signature of Authorized Pers	on fuy			

MAIL TO:

**Division of Business Services** 

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

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