

STAMP

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

RECEIVED R.I. DEPT. OF STATE SERVICE BUS SYCS DEF

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

2023 MAY 1- A 11: 36

1. Entity ID Number	2. Exact name of the Limited Liability Company			
001701334	Providence !	Growth 2019 Fi	und Ma	nagerill
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
531390	To operate and manage a real estate business, including the purchasing, selling, leasing, mortgaging, marketing, improving, maintaining and managing of real estate			
5 State of Formation				
Rhode Island		•		
6. Principal Office Address		City	State	Zip
269 Wickenden St		Providence	RI	02903
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Dustin Dezube		Contact Title Managing Member		
Street Address 269 Wickenden St		City Providence	State RI	Zip 02903
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			Date	
Dustin Dezube			4/17/23	
Signature of Authorized Person				

NS FILE: 1136 MAY 1,1 2023 BY_ 1640

MAIL TO:

Division of Business Services

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

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