



State of Rhode Island
Department of State - Business Services Division

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Annual Report for the year: 2021
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 000905626		2. Exact name of the Limited Liability Company ARC HTNEWRI001, LLC			
3. NAICS Code 531120		4. Brief description of the character of business conducted in Rhode Island Own, manage, and lease real estate.			
5. State of Formation DE					
6. Principal Office Address 38 Washington Street		City Newport	State RI	Zip 02840	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Michael Anderson		Contact Title Manager			
Street Address 38 Washington Street		City Newport	State RI	Zip 02840	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.					
<i>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.</i>					
Name of Authorized Person Michael Anderson, Authorized Signatory			Date 5/2/2023		
Signature of Authorized Person 					

FILED

MAY 18 2023

1:08

BY MAN B NEME

MAIL TO:
 Division of Business Services
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 Phone: (401) 222-3040
 Website: www.sos.ri.gov