RI SOS Filing Number: 202335805480 Date: 5/18/2023 4:00:00 PM



State of Rhode Island

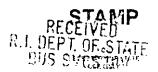
## **Department of State - Business Services Division**

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.



2023 HAY 18 P 2: 23

| 1. Entity ID Number<br>001743119                  | Exact name of the Limited Liability Company     STREET, LLC  |  |                     |                    |
|---|--|--|---------------------|--------------------|
| 3. NAICS Code<br>531210                           | · · ·  | Brief description of the character of business conducted in Rhode Island     Real Estate Investments |                     |                    |
| 5. State of Formation<br>RHODE ISLAND             |  |  |                     |                    |
| 6. Principal Office Address<br>4 WOODLAND TERRACE |  | City<br>PROVIDENCE   | State<br>RI         | Zip<br>02906       |
| 7. Mailing Address of Limite                      | d Liability Company and Nam                                  | e or Title of Contact Person   | •                   | <b>.</b>           |
| Contact Name WALTER L. BRONHARD                   |  | Contact Title MANAGER  |                     |                    |
| Street Address 4 WOODLAND TERRACE                 |  | City PROVIDENCE  | State RI            | Zip 02906          |
| 8. The Resident Agent infor                       | mation currently of record with                              | the RI Department of State is accura   | ite. Changes requir | e filing Form 642. |
|   | l declare and affirm that I ha<br>tatements contained herein | ve examined this report, including are true and correct.   | any accompanyin     | g schedules and    |
| Name of Authonzed Person                          |  |  | Date                |                    |
| WALTER L. BRONHARD                                |  |  | 5/15/22             |                    |
| Signature of Authorized Per                       | son WWW W  | \<br>\   | 1                   | ' 3                |

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.n.gov MAY 1 9

BY

MAY 18 2023