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State of Rhode Island

**Department of State - Business Services Division** 

Annual Report for the year: Limited Liability Company

2023.

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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.

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2023 MAY 26 P 4: 12

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1. Entity ID Number	2. Exact name of the Limited Liability Company			
17400 64	CROWN LORA LLC			
3. NAICS Code 35/1/0	4. Brief description of the character of business conducted in Rhode Island Zenfal.			
5. State of Formation				
RI				
6. Principal Office Address		City	State	Zip
1318 CHALKSTO	INE AVE.	Providence	RI	02908
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name	4	Contact Title	•	
IlUNINAM	CORONLA	MANAGER		
Street Address 1318 CHALKSTONE	. Are	Providence	State	<sup>2ip</sup> 02908
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
9. 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 LINAINA CIRONA		Date O		
Signature of Authorized Person Therefore				

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov PILED

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