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State of Rhode Island

Department of State - Business Services Division

Annual Report for the year:

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.

RECEIV'S R.I. DEPT. OF	ED STATE:
2023 JUN 12	D 12: 36

1. Entity ID Number 2. Exact name of the Limited Liability Company TWP SNINTHMENTS LLC							
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
5. State of Eormation	Buy 4	Sell 1	real	Estato	٤		
6. Principal Office Address A3A Puty	iam Pike	Solu	istan	State RI	2ip 0 29 19		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name	Pimentel	Contact Title	non	er_	·		
Street Address 334 F	Irtnam Pirue	City OP N	nstm	State 21	Zip_02919		
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	Ray Pim	entel		Date Q 12	2023		
Signature of Authorized Person	M						

MAIL TO:

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

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

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