



State of Rhode Island
Department of State - Business Services Division

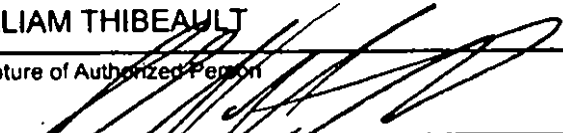
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R.I. DEPARTMENT OF STATE
PROVIDENCE, RI

2023 JUN 23 A 8:29

Annual Report for the year
Limited Liability Company

2019

- 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 001660274		2. Exact name of the Limited Liability Company 487 ALLENS, LLC	
3. NAICS Code 531311		4. Brief description of the character of business conducted in Rhode Island HOLDS TITLE TO REAL ESTATE	
5. State of Formation RI			
6. Principal Office Address 10 HUNTINGTON AVE SUITE 217		City BOSTON	State MA Zip 02116
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name WILLIAM THIBEAULT		Contact Title MANAGER	
Street Address P.O. BOX 990009		City BOSTON	State MA Zip 02199
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 WILLIAM THIBEAULT		Date 6-21-23	
Signature of Authorized Person 			

FILED

JUN 23 2023

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MAIL TO:
Division of Business Services
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