



State of Rhode Island  
Department of State - Business Services Division

JUN 30 2023  
299

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.

1. Entity ID Number 000092867		2. Exact name of the Limited Liability Company PREMISY LLC		
3. NAICS Code 531390		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE		
5. State of Formation RI				
6. Principal Office Address 8 Premisy Hill		City North Smithfield	State RI	Zip 02896
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name MADELEINE M FERROCCI		Contact Title		
Street Address 8 Premisy Hill		City North Smithfield	State RI	Zip 02896
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 MADELEINE M FERROCCI			Date 1/30/23	
Signature of Authorized Person MADELEINE M FERROCCI				

**MAIL TO:**

Division of Business Services  
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