



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.

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BUS SVCS DIV

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1. Entity ID Number 001658818		2. Exact name of the Limited Liability Company PL1, LLC			
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE			
5. State of Formation RI					
6. Principal Office Address 650 DEXTER STREET		City CENTRAL FALLS	State RI	Zip 02863	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name EMMANUEL CHRISTODULOU			Contact Title		
Street Address 650 DEXTER STREET		City CENTRAL FALLS	State RI	Zip 02863	
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				Date 6.30.2023	
Signature of Authorized Person 					

FILED

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BY F7160

AC

MAIL TO:

Division of Business Services
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