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2023 JUL 20 P 2: 33



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.

PBRBIY: Additional of the	
A straight of the straight of	obiliby Company
1. Entity ID Number 2. Exact name of the Limited Lie	Do-Lie 110
10100829 Southwar	Rearry hu
3.NAIOS Code 4. Brief description of the characteristics	cter of business conducted in Rhode Island
12 11 De Paris	I apartment rentals
S. Lisano de solimation	application 143 april
102	
	City State Zip
B. Principal Office Address	MA NUZZ
1 107-5 i ashinatin St link	1100
7. Making Address of Limited Liability Company and Name or Title of Contact Person	
Contact Name	Contact Title
MYAK SWIARh	DWIE
Street Address 1	State A Zip NUR]
1745 Wahnand and	Shapes require filing Form 642
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 perfury, 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.	
	Date /
Name of Authorized Person	10/27/2 3
Mys Sugar	
Signature of Authorized Person	
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7. A.	abl .
	2:34

FILED

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MAIL TO:

Division of Business Services

148 W. River Street, Providence. Rhode Island 02904-2615

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