RI SOS Filing Number: 202340062650 Date: 8/1/2023 4:00:00 PM



State of Rhode Island

Department of State - Business Services Division

RECEIVED R.I. DEPT. OF STATE BUS SYCS DIV

Annual Report for the year: 1023
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.

2023 AUG -1 P 2: 07

1. Entity ID Number 2.	2. Exact name of the Limited Liability Company			
001665142	Sakonnet R	eal Estate qu	our LLE	
	4. Brief description of the character of business conducted in Rhode Island			
53 1190				
5 State of Formation				
R.L.	p.	City Clanston		
6. Principal Office Address		City	State	Zip
14 Reeves pl	, tl	Clanston	R.D.	02920
7. Mailing Address of Limited Liability		e of Contact Person		
Contact Name		Contact Title		
Street Appliess / Keenes	2			
Street Address		City	State	Zip
/ Reves		Clanster	2 3	02920
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 decia statements, and that all statement		•	ng any accompanyi	ng schedules and
Name of Authorized Person			Date	11
Ulosum Lloys			8	1/23
Signature of Authorized Person				
6	_			

FILED

AUG 0 1 2023 BY ML 29

MAIL TO:

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

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