

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2020 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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Entity ID Number	2. Exact name of the Limited Liability Company				
000507139	North Main Street Self Storage LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
493110	we rent Storace Units				
5. State of Formation					
1 LI					
6. Principal Office Address		City	State	Zip	
750 Wi	nter St.	Woonsocket	NI '	02895	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name		Contact Title			
Jeff Winiker		Ower			
Street Address		City	State	Zip	
3 Crystal Dr.		traniu,	MA	02038	
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	Jeff w	iniller	Date 86	5123	
Signature of Authorized Person					

MAIL TO:

Division of Business Services

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

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

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