RI SOS Filing Number: 202342208740 Date: 10/12/2023 2:39:00 PM



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: Limited Liability Company

2018

→ 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 Lia	bility Company			
000507139	North Main	Street Self	Storag	elle	
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
493110	Self Sto	rage facilit	4		
5. State of Formation	mar inhic	s to cent	/\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\		
A.I.	05 765 12	3 10 1 2 11	0, 117	٠.	
6. Principal Office Address	. (1)	City	State	Zip	
750 051~	ter Street	Woonsocket	RI	02895	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name		Contact Title			
Jeff Li), ~, les	Owner			
Street Address	D.	Franklin	State	Zip () 2038	
			I ''		
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 (Wini	Ner	Date & A	5/33	
Signature of Authorized Person	1/				
Signature bi Authorized Person					
					
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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 FILED

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