RI SOS Filing Number: 202342589830 Date: 11/6/2023 10:09:00 AM

| State of Rhode Island Department of State - Business Services Division | | | | |
|---|--|-----------------------|---------------------------|----------------------|
| Annual Report for the year: Limited Liability Company | 2023 | | STAMP | |
| → Filing period: February 1 - May 1 → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by May 31. | | | R.I. DEPT. OF BUS SVCS | |
| 1. Entity ID Number | 2. Exact name of the Limited Lia | D VAI | | |
| 1697987 | Etonemkee LLC | | 0 M | |
| 3. NAICS Code 531120 5. State of Formation MA | 4. Brief description of the character of business conducted in Rhode Island Real Estate - Commercial | | | |
| 6. Principal Office Address | <u> </u> | City | State | Zip |
| c/o Coneco, 4 1st Street | | Bridgewater | MA | 02324 |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | | |
| Contact Name Robert R. Lincoln | | Contact Title Manager | | |
| Street Address c/o Coneco, 4 1st Street | | City Bridgewater | State MA | ^{Zip} 02324 |
| 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 | |
| Robert R Lincoln | | | 10/27/2023 | |
| 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 NOV 0 6-2023 BY_W_W\\\