

## State of Rhode Island Department of State - Business Services Division

→ 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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1. Entity ID Number		2. Exact name of the Limited Liability Company				
001695641	Sharpe Azatak LLC.					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
531390	Real Estate Management Development, AND RelateD Activities, Leasing.					
5. State of Formation	AND Rolaton Activities Land					
RI	THE RECATED ACTIVITIES, LEASING.					
6. Principal Office Address	<del>/</del>	City	State	Zip		
56 Regen	+5+	Cambridge	MA	02140		
7. Mailing Address of Limited Lia	bility Company and Name or Title	of Contact Person				
Contact Name	Contact Title					
BART W.						
Street Address 56 Regent	St	CAMBRIDGE	State	02140		
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 BART W. BUSSINK		Date 12/18/23				
Signature of Authorized Person						

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DEC 26 2023

BY MNTSY

MAIL TO:

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

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