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

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Annual Report for the year: 202/Limited Liability Company

→ Filing period: February 1 - May 1

→ Fiting Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

2024 JAN 10 P 2: 03

1. Entity ID Number	2. Exact name of the Limited Liability Company			
00/695700	Narya, LLC			
3. NAICS Code	Brief description of the character of business conducted in Rhode Island			
531390	Real Estate Investment from			
5. State of Formation				
6. Principal Office Address	<u> </u>	City	State	Zip
574 Gravelly	Hill Rol	Wakefeld	R)	02879
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name	-	Contact Title		
FRANK A Addings on TV Manager  Street Addings Strate   Zip   Strate   Zip   Wokefield   R1   02879				
Street Address		City	State	Zīp
574 Garell	u At 11 Kol	1 77 1 77	KI	02879
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				
Frank A. Robinson IV			1-8-23	
Signature of Authorized Persen				

FILED

JAN 1 0 2024

MAIL TO:

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

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