


**State of Rhode Island
Department of State - Business Services Division****Annual Report for the year:** 2024
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.

**FILED
STAMP
JAN 18 2024
BY 8039
DS**

1. Entity ID Number 001671700		2. Exact name of the Limited Liability Company 316-318 METACOM AVENUE LLC	
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island OWNER AND MANAGER OF RENTAL RESIDENTIAL PROPERTY	
5. State of Formation RI			
6. Principal Office Address 32 LORRAINE STREET		City BARRINGTON	State RI
		Zip 02806	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name EDWARD J COX II		Contact Title MANAGER	
Street Address 32 LORRAINE STREET		City BARRINGTON	State RI
		Zip 02806	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. <i>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.</i>			
Name of Authorized Person EDWARD J COX II			Date 01/16/2024
Signature of Authorized Person 			

MAIL TO:

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