|  | Sta                              | ate of Rhode Is       | land               | Fee: \$50.00       |
|--|----------------------------------|-----------------------|--------------------|--------------------|
|  | Office of the Secretary of State |                       |                    |                    |
| Division Of Business Services  |                                  |                       |                    |                    |
| Providence RI 02904-2615   |                                  |                       |                    |                    |
| 1636   |                                  | (401) 222-3040        |                    |                    |
| Limited Liability C  | ompany                           |                       |                    |                    |
| Annual Report<br>Filing Period: Februa   | ry 1 - May 1                     |                       |                    |                    |
| In accordance with R   | .I.G.L. 7-16-66(d), each         | n limited liability c | ompany failing or  |                    |
| refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.                                    |                                  |                       |                    |                    |
| ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024   |                                  |                       |                    |                    |
| <b>1. ID No.</b> 001755178   |                                  |                       |                    |                    |
|  |                                  |                       |                    |                    |
| 2. Exact Name of the Limited Liability Company Nada RE Investments LLC   |                                  |                       |                    |                    |
| 3. State of Formation  | on                               |                       |                    |                    |
| State: <u>RI</u>   |                                  |                       |                    |                    |
| NAICS CODE   |                                  |                       |                    |                    |
| Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online. |                                  |                       |                    |                    |
| <u>531110</u>  |                                  |                       |                    |                    |
| 4. Brief Description<br>Island   | of the Character of the          | e Business Which      | n is Actually Conc | lucted in Rhode    |
| BUY, SELL, AND INVEST IN REAL ESTATE AND COLLABORATING WITH PARTNERS   |                                  |                       |                    |                    |
| 5. Principal Office A  | Address                          |                       |                    |                    |
| No. and Street:  | <u>12 EAST AVE</u>               |                       |                    |                    |
| City or Town:  | LINCOLN                          | State: <u>MA</u>      | Zip: <u>02865</u>  | Country: <u>US</u> |
| 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:   |                                  |                       |                    |                    |
| Contact Name: CHRISTELLE MADOU Contact Title: AGENT  |                                  |                       |                    |                    |
| No. and Street:  | PO BOX 22073<br>LINCOLN          | State: RI             | Zin: 02865         | Country: US        |
| City or Town:  |                                  |                       | Zip: <u>02865</u>  | Country: <u>US</u> |
| 7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER<br>Changes Require Filing of Form 642 - R.I.G.L. 7-16-11  |                                  |                       |                    |                    |
| <u>CHRISTELLE MADOU 12 EAST AVE LINCOLN , RI 02865</u>   |                                  |                       |                    |                    |
|  |                                  | ,                     |                    |                    |

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 26 Day of January, 2024 at 2:37:04 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

## By CHRISTELLE MADOU

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2024 State of Rhode Island All Rights Reserved