

🤽 · State of Rhode Island Department of State - Business Services Division

FILED AMP

Annual Report for the year: **Limited Liability Company**

2024

JAN 26 .. 2024 CT STATE

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

1. Entity ID Number	2. Exact name of the Limited Li	iability Company		
000100335	1	ty Associates	LLC	. •
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
531110				
5. State of Formation	0 1	r 1 1		
RI	Keal	Estate		
6. Principal Office Address		City	State	Zip
III Winnis		Warwick	RI	02886
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Joan Sackett		Contact Title		
Street Address		City	State	Zip
III Winnisquam Dr.		Warwick	RI	02886
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	Sackett		Date 1 2	1/2024
Signature of Authorized Person				

MAIL TO:

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Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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