

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

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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.

1. Entity ID Number 000154122	2. Exact name of the Limited Liability Company SPL Associates, LLC			
3. NAICS Code 531312	Brief description of the character of business conducted in Rhode Island Purchase, hold, develop, sell, and rent real estate.			
5. State of Formation RI				
6. Principal Office Address 101 Circuit Drive		City North Kingstown	State RI	Zip 02852
7. Mailing Address of Limite	d Liability Company and Name	or Title of Contact Person	I	, , , , , , , , , , , , , , , , , , ,
Contact Name Steven R. Alviti		Contact Title Manager		
Street Address 101 Circuit Drive		City North Kingstown	State RI	Z ₁ p 02852
8. The Resident Agent infor	mation currently of record with	the RI Department of State is accur	ate. Changes requ	ire filing Form 642.
	l declare and affirm that I hav tatements contained herein a	re examined this report, including re true and correct.	any accompany	ing schedules and
Name of Authorized Persor Steven R. Alviti		,	Date	17/24
Signature of Authorized Per	rson	7		/ /

MAIL TO:

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

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