State of Rhode Island Fee: \$50.00				
Office of the Secretary of State				
Division Of Business Services				
148 W. River Street				
Providence RI 02904-2615 (401) 222-3040				
Limited Liability Company Annual Report				
Filing Period: February 1 - May 1				
In accordance with R.I.G.L. 7-16-66(d), each limited liability company 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 <b>2024</b> : <u>2024</u>				
1. ID No. <u>001748347</u>				
2. Exact Name of the Limited Liability Company Key Real Estate Services 2, LLC				
3. State of Formation				
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>531230</u>				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
6531 REAL ESTATE AGENTS AND MANAGERS				
ESTABLISHMENTS PRIMARILY ENGAGED IN RENTING, BUYING, SELLING, AND				
MANAGING,				
REAL ESTATE FOR OTHERS.				
AGENTS, REAL ESTATE				
BROKERS, REAL ESTATE				
BUYING AGENTS, REAL ESTATE				
<u>CONDOMINIUM MANAGERS</u> ESCROW AGENTS, REAL ESTATE				
FIDUCIARIES, REAL ESTATE				
LISTING SERVICE, REAL ESTATE				
MANAGERS, REAL ESTATE				
MULTIPLE LISTING SERVICES, REAL ESTATE				
1				

REAL ESTATE AUCTIONS RENTAL AGENTS FOR REAL ESTATE SELLING AGENTS FOR REAL ESTATE				
5. Principal Office Address				
No. and Street:585 KINGSTOWN RD.City or Town:WAKEFIELD	State: <u>RI</u>	Zip: <u>02879</u>	Country: <u>USA</u>	
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name:DAVID CAPPUCCI Contact Title:No. and Street:585 KINGSTOWN RD.City or Town:WAKEFIELD	PRESIDENT State: <u>RI</u>	Zip: <u>02879</u>	Country: <u>USA</u>	
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11				
<u>SEAN C. DONOHUE 585 KINGSTOWN RD. WAKEFIELD</u> , <u>RI 02879</u>				
8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).				
<ul> <li>Signed this 7 Day of February, 2024 at 3:14:32 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.</li> <li>By <u>DAVID CAPPUCCI</u> Signature of Authorized Person</li> </ul>				
Form No. 632 Revised 09/07				
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