

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

BECFIVED

Annual Report for the year: 2023 **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.

THE STATE					
2024 FEB -9	Þ	i: 1	0		

1 Entity ID Number	2. Exact name of the Limi	Exact name of the Limited Liability Company				
001731163	208 Howland Avenue LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
531390	TO ACQUIRE, SELL, HOLD, MANAGE, AND INVEST IN AND PRESERVE					
5. State of Formation	FOR APPRECIATION A VARIETY OF ASSETS, SPECIFICALLY					
Rhode Island	INCLUDING, BUT NOT LIMITED TO, REAL ESTATE.					
6. Principal Office Address	-	City	State	Zip		
174 Bellevue Avenue,	, #204	Newport	RI	02840		
7. Mailing Address of Limited	Liability Company and Name	or Title of Contact Person				
Contact Name  Mark H	oyan	Contact Title	<del>-</del> ·			
Street Address 74 Bellevue	e Avenue, #204	City Newport	State RI	<sup>Zip</sup> 02840		
8. The Resident Agent inform	ation currently of record with the	he RI Department of State is accu	urate. Changes require	e filing Form 642		
	. I declare and affirm that I ha tements contained herein ar	eve examined this report, include true and correct.	ding any accompany	ing schedules and		
Name of Authorized Person		<del></del>	Date	1011		
Mark R. Horan 2/12/24				12/24		
Signature of Authorized Person	on		·	,		

FEB 9 2024

MAIL TO:

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

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