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State of Rhode Island Department of State - Business Services Division

Annual Report for the year: Limited Liability Company

2024

FILED

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

FEB 1 4 2024 BY 1000

Entity ID Number	2. Exact name of the Limited Liability Company			
1691700	2719 Pawtucket Avenue, LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
531311	To own and manage real estate.			
5. State of Formation	1			
Rhode Island				
6. Principal Office Address		City	State	Zip
2735 Pawtucket Avenue		East Providence	RI	02914
7. Mailing Address of Limited Li	ability Company and Name or Tit	le of Contact Person		
Contact Name Mark S. Exter		Contact Title		
Street Address 2735 Pawtucket Avenue		City East Providence	State RI	^{Zip} 02914
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			Date	
Mark S. Exter			2/8/24	
Signature of Authorized Person	Es			-

Division of Business Services

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

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