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State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2024 **Limited Liability Company**

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→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

Entity ID Number	2. Exact name of the Limited Liability Company				
292310	BYFIELD STREET, LLC				
3. NAICS Code 53 1110 5. State of Formation RHODE ISLAND	4. Brief description of the cha REAL ESTATE	aracter of business conducted in	Rhode Island		
6. Principal Office Address		City	State	Zip	
40 HIGHLAND DRIVE		JAMESTOWN	RI	02835	
7. Mailing Address of Limited Lia	ibility Company and Name or I	Title of Contact Person			
Contact Name LOUIS E. BALDI		Contact Title REGISTERED AGENT			
Street Address 445 BUDLONG ROAD		City	State	^{Zip} 02920	
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					
RONALD J. GOLDSMITH			02/05/24		
Signature of Authorized Person					

MAIL TO:

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

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