RI SOS Filing Number: 202446718280 Date: 2/14/2024 4:00:00 PM

Annual Report for the year:AIAY Limited Liability Company			FILED	
→ Filing period: Februa → Filing Fee: \$50.00		ay 31.	FEB 14 BY	2024
1. Entity ID Number 001737226	2. Exact name of the Limite 490 OB, LLC	2. Exact name of the Limited Liability Company 490 OB, LLC		0
3. NAICS Code 53 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	4. Brief description of the ci Real Estate	naracter of business conducted	in Rhode Island	
6. Principal Office Address 116 Orange Street		City Providence	State RI	Zip 02903
	ed Liability Company and Name or			
Contact Name Jeremy Sherer		Contact Title Operating Manager		
Street Address 116 Orange Street		City Providence	State RI	Zip 02903
8. The Resident Agent info	mation currently of record with the	RI Department of State is accu	ırate. Changes requir	e filing Form 642.
	I declare and affirm that I have of the large in the larg		ng any accompanyin	g schedules and
Name of Authorized Perso Jeferny Sherer			Date	
1	erson		1	<u></u> :

MAIL TO:

Division of Business Services

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

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