RI SOS Filing Number: 202446744180 Date: 2/16/2024 4:00:00 PM

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

Annual Report for the year: 2024 **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.

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| BY_ | - 6883 |
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| 1. Entity ID Number | 2. Exact name of the Lim | 2. Exact name of the Limited Liability Company | | | | |
|--------------------------------------|--|--|-----------------------|---------------------------------|--|--|
| 103369 | MACERA PROF | MACERA PROPERTIES LLC | | | | |
| 3. NAICS Code | · · · · · · · · · · · · · · · · · · · | Brief description of the character of business conducted in Rhode Island | | | | |
| 531110 | Engage in acquirin | Engage in acquiring, renting and managing real estate | | | | |
| 5. State of Formation | | | | | | |
| Rhode Island | | | | | | |
| 6. Principal Office Address | | City | State | Zip | | |
| 685 Hope Furnace Road | | Норе | RI | 02831 | | |
| 7. Mailing Address of Limite | d Liability Company and Name | or Title of Contact Person | • | • | | |
| Contact Name Frank H. Macera Sr. | | Contact Title Member | | | | |
| Street Address 685 Hope Furnace Road | | City Hope | State | ^{Z₁p} 02831 | | |
| 8. The Resident Agent infor | mation currently of record with t | the RI Department of State is ac | curate. Changes requi | re filing Form 642. | | |
| | y, I declare and affirm that I h tatements contained herein a | ave examined this report, incl re true and correct. | uding any accompan | ying schedules and | | |
| Name of Authorized Person | | | Date | | | |
| Frank H. Macera Sr. | | | 2-05-04 | | | |
| Signature of Authorized Per | son I will HM | 'arara/ | • | | | |