



State of Rhode Island

Department of State - Business Services Division

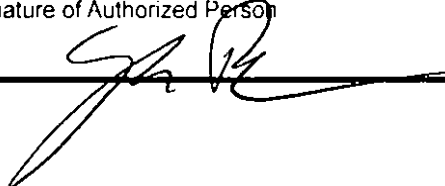
Annual Report for the year: 2024
Limited Liability Company

- Filing period: February 1 - May 1
 → Filing Fee: \$50.00
 → Penalty: Additional \$25.00 fee if form is not filed by May 31.

STAMP

FEB 20 2024

6752

1. Entity ID Number 001742651		2. Exact name of the Limited Liability Company Good Shepherd, LLC	
3. NAICS Code 531311		4. Brief description of the character of business conducted in Rhode Island real estate holding	
5. State of Formation Rhode Island			
6. Principal Office Address 9 Chickadee Court		City Bedford	State NH
Zip 03110			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Christopher G. Bond		Contact Title Member	
Street Address 9 Chickadee Court		City Bedford	State NH
Zip 03110			
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642			
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 Christopher Bond		Date 2/9/24	
Signature of Authorized Person 			

MAIL TO:

Division of Business Services

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

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Website: www.sos.ri.gov