RI SOS Filing Number: 202447110010 Date: 2/22/2024 4:00:00 PM

## 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.

1. Entity ID Number	2. Exact name of the Limited Liability Company				
001339542	Murray Burns, LLC				
3. NAICS Code 531390	Brief description of the character of business conducted in Rhode Island     Real estate				
5. State of Formation					
6. Principal Office Address		City	State	Zip	
122 Touro Street		Newport	RI	02840	
7. Mailing Address of Limited	d Liability Company and Name or Til	le of Contact Person	•		
Contact Name Turner C. Scott		Contact Title Resident Agent			
Street Address 122 Touro Street		City Newport	State RI	<sup>Zip</sup> 02840	
8. The Resident Agent inform	nation currently of record with the R	Department of State is acc	urate. Changes require	e filing Form 642.	
	r, I declare and affirm that I have e atements contained herein are tru	•	ding any accompany	ring schedules and	
Name of Authorized Person  TMBARL MURRAY			Date Feß C	Tes 07/24	
Signature of Authorized Pe	BAR MURRAY			<del>, , , , , , , , , , , , , , , , , , , </del>	

MAIL TO:

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

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