



State of Rhode Island

Department of State - Business Services Division

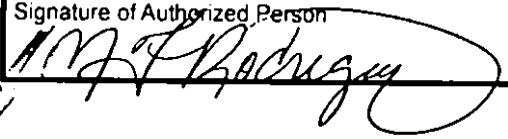
Annual Report for the year: 2024
Limited Liability Company

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

FILED STAMP**FEB 28 2024**BY DS

1. Entity ID Number 000535685		2. Exact name of the Limited Liability Company T.M.F. ENTERPRISES, LLC	
3. NAICS Code 531110		4. Brief description of the character of business conducted in Rhode Island PROPERTY MANAGEMENT	
5. State of Formation Rhode Island			
6. Principal Office Address 20 Morgan Drive		City Narragansett	State RI
Zip 02882			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Steven A. Moretti, Esq.		Contact Title Registered Agent	
Street Address 1140 Reservoir Avenue		City Cranston	State RI
Zip 02920			
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
<i>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.</i>			
Name of Authorized Person Maria T. Rodriguez		Date 2/18/24	
Signature of Authorized Person 			

MAIL TO:

Division of Business Services

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