



State of Rhode Island
Department of State - Business Services Division

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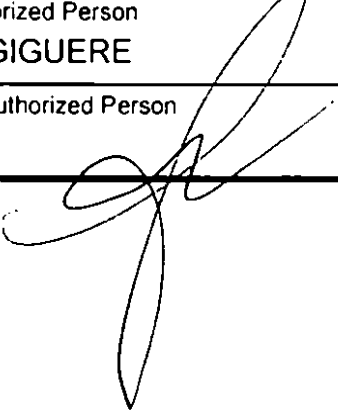
Annual Report for the year: 2017

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 001665174		2. Exact name of the Limited Liability Company LAT, LLC		
3. NAICS Code 531390		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE INVESTMENT		
5. State of Formation RI				
6. Principal Office Address 167 BLACK POINT LANE		City PORTSMOUTH	State RI	Zip 02871
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name ANGELA GIGUERE		Contact Title MEMBER		
Street Address 9 VIA LOS INCAS		City PALM BEACH	State FL	Zip 33480
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.				
9. 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 ANGELA GIGUERE			Date 2/28/2024	
Signature of Authorized Person 				

FILED

MAR 01 2024

BY ML J8YDZ

9:15

MAIL TO:

Division of Business Services

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