RI SOS Filing Number: 202447783430 Date: 3/4/2024 4:00:00 PM



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

Annual Report for the year: 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.

స్ట్	
200 200 200 200 200 200 200 200 200 200	
AMP	
S W ANY OF STATE	
20	

2. Exact name of the Limited Liability Company				
ANM Property Solutions Grocep LLC				
4. Brief description of the character of business conducted in Rhode Island				
Leal Estate				
<del></del>	City	State	Zip	
et 3FL.	Providence	RI	02906	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Aydin Mustafayer		Contact Title		
ustalayer				
7 '	City	State	Zip	
	Providence	KI	02906	
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  Ayclin Musta-Cegar		03.04.2 V		
Signature of Authorized Person				
Lacke plasfel				
	ANM Property  4. Brief description of the character  Leal Es  et 3FL.  bility Company and Name or Title  Castafage  In currently of record with the RID  eclare and affirm that I have examined herein are true	ANM Property Solutions GRO  4. Brief description of the character of business conducted in Rhoc  Real Estate  City  Providence  bility Company and Name or Title of Contact Person  Contact Title  City  City  City  Contact Title  City  City  City  Contact Title  City  Cit	ANM Property Solutions Grace LL  4. Brief description of the character of business conducted in Rhode Island  Real Estate  City State  Providence LI  bility Company and Name or Title of Contact Person  Contact Title  City State  Contact Title  City State  City State  City State  City State  Contact Title  City State  Contact Title  City State  City State  City State  City State  City State  Contact Title  City State  Contact Title  City State  City State  City State  City State  Contact Title  City State  City State	

VIS FILED WY

MAR - 4 2024

BY LYGAL

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov