

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

STAMP

Annual Report for the year: **Limited Liability Company**

2024

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

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· ·	2. Exact name of the Limited Liability Company				
355453	R.E. Johnston Family, LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
531390	To own, acquire, operate, manage, lease and sell real estate				
5. State of Formation					
RI					
6. Principal Office Address		City	State	Zip	
c/o Capstone Properties, 2	25 Burlington Mall Rd.	Burlington	MA	01803	
7. Mailing Address of Limited Liabi	lity Company and Name or Title	of Contact Person	<u> </u>	.	
Contact Name Paul Griesinger		Contact Title Manager			
Street Address 25 Burlington Mall Rd, Ste. 112		City Burlington	State MA	^{Zip} 01803	
8. The Resident Agent information	currently of record with the RI	Department of State is accura	ate. Changes require	filing Form 642.	
9. Under penalty of perjury, I dec statements, and that all stateme			ing any accompany	ing schedules and	
Name of Authorized Person	orized Person		Date	1-04	
Paul Griesinger			2/23/264		
Signature of Authorized Person	}		. 1 — (

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MAIL TO:

Division of Business Services

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

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