



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

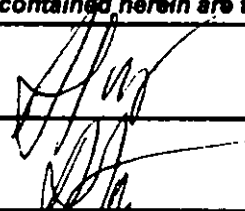
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED

MAR 07 2024

BY

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|---|--|---|-----------------------------|
| 1. Entity ID Number 000119499 | | 2. Exact name of the Limited Liability Company MIMA, LLC | |
| 3. NAICS Code 531110 | | 4. Brief description of the character of business conducted in Rhode Island Residential rental real estate | |
| 5. State of Formation RI | | | |
| 6. Principal Office Address 25 South Street | | City Mansfield | State MA Zip 02048 |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | |
| Contact Name Andres Gazzolo | | Contact Title Manager | |
| Street Address 25 South Street | | City Mansfield | State MA Zip 02048 |
| 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 Andres Gazzolo | | Date 3/4/24 | |
| Signature of Authorized Person  | | | |

MAIL TO:

Division of Business Services

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