

State of Rhode Island Department of State - Business Services Division

FILED

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.

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1. Entity ID Number	2. Exact name of the Limited Liability Company				
000912391	GREENSPAN,	GREENSPAN, LLC			
3. NAICS Code 541611	4. Brief description of the Asset protection	Brief description of the character of business conducted in Rhode Island Asset protection			
5. State of Formation					
6. Principal Office Address	_1	City	State	Zip	
24 South Meadow Lane		Barrington	RI	02806	
7. Mailing Address of Limit	ed Liability Company and Name	or Title of Contact Person	<u> </u>	1	
Contact Name		Contact Title			
Street Address 24 South Meadow Lane		City Barrington	State RI	^{Zip} 02806	
8. The Resident Agent info	rmation currently of record with	the RI Department of State is accur	rate. Changes requir	e filing Form 642.	
	ry, I declare and affirm that I h tatements contained herein a	ave examined this report, includ re true and correct.	ing any accompan	ying schedules and	
Name of Authorized Person			Date / /		
Joseph R. Marion III	, Esq.		3/11	/ 	
Signature of Authorized Pe	rson				

Division of Business Services

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