RI SOS Filing Number: 202448942610 Date: 3/13/2024 4:00:00 PM



## 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 fo

→ Penaity: Additional \$2	5.00 fee if form is not filed by Ma	y 31.			
1. Entity ID Number	2. Exact name of the Limited	Liability Company			
1728875	RICG-L, LLC				
3. NAICS Code	4. Brief description of the cha	Brief description of the character of business conducted in Rhode Island			
531390	To own and lease rea	To own and lease real estate.			
5. State of Formation	$\dashv$				
Rhode Island					
6. Principal Office Address		City	State	Zip	
6 Blackstone Valley Pl., Ste. 105		Lincoln	RI	02865	
7. Mailing Address of Limited	d Liability Company and Name or T	itle of Contact Person		<del></del>	
Contact Name Joseph P. Mazza, M.D.		Contact Title			
6 Blackstone Valley Pl., Ste. 105		City Lincoln	State RI	<sup>Zıp</sup> 02865	
8. The Resident Agent inform	nation currently of record with the F	RI Department of State is acc	curate. Changes require	e filing Form 642.	
	r, I declare and affirm that I have atements contained hetein are tr		iding any accompany	ing schedules and	
Name of Authorized Person		<del></del>	Date		

MAIL TO:

**Division of Business Services** 

Joseph P. Mazza, M.D. Signature of Authorized Person

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

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