

## State of Rhode Island

## **Department of State - Business Services Division**

Annual Report for the year:
Limited Liability Company

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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Entity ID Number	2. Exact name of the Limited Liability Company				
001762482	3Daughters LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
531390	Real Estate Holding Company.				
5. State of Formation					
Rhode Island					
6. Principal Office Address	<u>,1</u>	City	State	Zıp	
52 Teakwood Drive W	Coventry		RI	02816	
7. Mailing Address of Limited L	iability Company and Name or	r Title of Contact Person	<b>_</b>	I	
Contact Name Christos Spyridis		Contact Title Sole Member			
Street Address 52 Teakwood Drive W		Coventry	State	<sup>Zip</sup> 02816	
8. The Resident Agent informat	tion currently of record with the	RI Department of State is accu	rate. Changes requir	e filing Form 642	
9. Under penalty of perjury, I statements, and that all state		re examined this report, include true and correct.	ding any accompany	ing schedules and	
Name of Authorized Person	Λ		Date ()	121	
Christos Spyridis, Sole Member		12/11/14			
Signature of Authorized Person					

MAIL TO:

**Division of Business Services** 

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

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