

## State of Rhode Island

## Department of State - Business Services Division

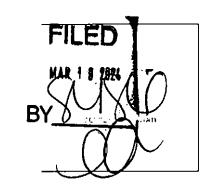
Annual Report for the year: **Limited Liability Company** 

2024

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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



1. Entity ID Number	2. Exact name of the Limited Liability Company			
000704640	Warren LLC			
3. NAICS Code 531110	Brief description of the character of business conducted in Rhode Island real estate rental and leasing			
5. State of Formation				
6. Principal Office Address		City	State	Zip
63 Atlantic Avenue		Boston	MA	02110
7. Mailing Address of Limite	d Liability Company and Name	or Title of Contact Person		
Contact Name Madaline Nunez		Contact Title Accountant		
Street Address 63 Atlantic Avenue		City Boston	State MA	<sup>Z<sub>ip</sub></sup> 02110
8. The Resident Agent infor	mation currently of record with t	the RI Department of State is acc	curate. Changes require	filing Form 642.
	y, I declare and affirm that I h atements contained herein a	ave examined this report, inclure true and correct.	iding any accompany	ing schedules and
Name of Authorized Person  Renderson			Date 3-13-24	
Signature of Authorized Per	7 7 7 7		1	

## MAIL TO:

**Division of Business Services** 148 W River Street, Providence, Rhode Island 02904-2615

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