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State of Rhode Island
Department of State - Business Services Division

Annual Report for the year:
Limited Liability Company

→ Filing period: February 1 - May 1

Entity ID Number	2. Exact name of the Limited Liability Company			
001740318	SMG. Northgate, LLC			
3, NAICS Code	4. Brief description of the character of business conducted to the description			
531110	Lessor of Residential buildings and dwellings			
5. State of Formation			•	J
Phode Island				
6. Principal Office Address		City	State .	Zip
377 For Reach Road		West word	Ma	02090
7. Malling Address of Limited Liability Company and Name or Title of Contact Person				
Jay R. Peabody, Esq		Contact Title Resident Agent		
40 Westminsters B. The Resident Agest information	**************************************	Providence	R. ±	02403
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 begin are true and examined.				
statements, and that all statem	ents contained herein are true	(amined this report, including (any accompanyir	ng schedules and
Name of Authorized Person Date				
Raymond Safi, Manager			3/15/2024	
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

→ Filing Fee: \$50.00

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

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FORM 632 - Revised, 12/2023