

State of Rhode Island Department of State - Business Services Division

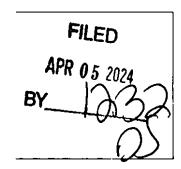
Annual Report for the year: Limited Liability Company

2024

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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



Entity ID Number	2. Exact name of the Li	2. Exact name of the Limited Liability Company			
488243	Two Sisters Re	Two Sisters Realty, LLC			
3. NAICS Code	4. Brief description of th	4. Brief description of the character of business conducted in Rhode Island			
531390	Real Estate holdi	Real Estate holdings and any other lawful purpose.			
5. State of Formation					
Rhode Island					
6. Principal Office Address		City	State	Zip	
2208 Plainfield Pike		Johnston	RI	02919	
7. Mailing Address of Limite	d Liability Company and Nam	e or Title of Contact Person			
Contact Name		Contact Title			
Joseph L. Vinagro		Manager			
Street Address 2208 Plainfield Pike		City Johnston	State RI	^{Zip} 02919	
8 The Resident Agent infor	mation currently of record with	n the RI Department of State is accu	irate. Changes requir	e filing Form 642	
	y, I declare and affirm that I tatements contained herein	have examined this report, include are true and correct.	ding any accompany	ring schedules and	
Name of Authorized Person			Date		
Joseph L. Vinagro 3/21/24					
Signature of Authorized Per	son		· ·		
·					

MAIL TO:

Division of Business Services

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

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