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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

→ Filing Fee: \$50.00

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

FILED

APR 08 2024

BY___O__

| 1. Entity ID Number 001702342 | 2. Exact name of the Limited Liability Company 43 Butts Rock Road, LLC | | | | | |
|---|---|------------------------------|----------|----------------------|--|--|
| 3. NAICS Code 531110 | Brief description of the character of business conducted in Rhode Island To own and manage real estate. | | | | | |
| 5. State of Formation | | | | | | |
| 6. Principal Office Address | | City | State | Zip | | |
| c/o One Citizens Plaza, Suite 530 | | Providence | RI | 02903 | | |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | | | | |
| Contact Name Colin O. Sherer, Esq. | | Contact Title Resident Agent | | | | |
| One Citizens Plaza, Suite 530 | | City Providence | State RI | ^{Zip} 02903 | | |
| 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 herein are true and correct. | | | | | | |
| Name of Authorized Person | | | Date | Date | | |
| Christopher J. Burns | | | 3/30/24 | | | |
| Signature of Authorized Person Christophu a. Suu | | | | | | |

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

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