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State of Rhode Island

Department of State - Business Services Division

FILED

APR 17 2024

Annual Report for the year: 2024 Limited Liability Company

No.

→ 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 001754123	2. Exact name of the Limited Liability Company 36 COLE ST, LLC 4. Brief description of the character of business conducted in Rhode Island To own and manage real estate			
3. NAICS Code 831311				
5. State of Formation Rhode Island				
6. Principal Office Address P.O. Box 2143		City Attleboro	State MA	Zip 02703
7. Mailing Address of Limite	ed Liability Company and Name	or Title of Contact Person		
Contact Name Edward DePhillips		Contact Title		
Street Address 153 College lace		^{City} Fairfield	State CT	^{Zip} 06824
8. The Resident Agent info	rmation currently of record with	the RI Department of State is acc	urate. Changes require	e filing Form 642.
Under penalty of perjury, statements, and that all s	I declare and affirm that I hav statements contained herein a	re examined this report, including true and correct.	ng any accompanyin	g schedules and
Name of Authorized Person Edward DePhillips			Date 4/1/24	
Signature of Authorized Pe	erson Don	helles		

MAIL TO:

Division of Business Services

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

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