	State of Office of the	Rhode Island Secretary of S		Fee: \$50.00
	Division Of	Business Servic	ces	
	148 W.	. River Street		
	Providence	e RI 02904-261	5	
7636	(401)) 222-3040		
Limited Liabili				
Annual Report Filing Period: Fe				
refusing to file its	ith R.I.G.L. 7-16-66(d), each limite s annual report within thirty (30) da 6-66(b&c)) is subject to a penalty f	ays after the time		/
ANNUAL REPO	RT YEAR - ENTER THE CURRENT	YEAR 2024 : <u>2</u>	2024	
1. ID No. <u>00</u>	1709146			
2. Exact Name	of the Limited Liability Company	GOLD COAST	<u> </u>	ES RI 1, LLC
3. State of Forr	nation			
State: <u>RI</u>				
	NAICS	S CODE		
-	it NAICS Code that best describes st of codes <u>here.</u> More information	· ·		
<u>721110</u>				
4. Brief Descrip Island	tion of the Character of the Busir	ness Which is A	ctually Condu	cted in Rhode
EXTENDED S	TAY HOTEL			
5. Principal Off	ice Address			
No. and Street:	<u>16115 SW 117 AVENUE</u>			
	UNIT A7			
1	MIAMI	State: <u>FL</u>	Zip: <u>33177</u>	Country: <u>USA</u>
City or Town:				
	ess of Limited Liability Company	and Name or Ti	tle of Contact	Person:
		and Name or Ti	tle of Contact	Person:
6. Mailing Addr	Contact Title: <u>16115 SW 117 AVENUE,</u>	and Name or Ti	tle of Contact	Person:
6. Mailing Addro	Contact Title:			Person: Country: <u>USA</u>

7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST PROVIDENCE , RI 02914

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 23 Day of April, 2024 at 12:00:13 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By CHRISTOPHER EMMONS

Signature of Authorized Person

Form No. 632 Revised 09/07

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