

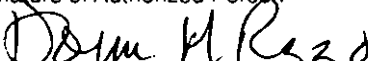


State of Rhode Island  
Department of State - Business Services Division

REC'D  
RIPES  
24 APR 22 08:43:00  
MP  
FOR  
DEPARTMENT OF STATE  
USE ONLY

Annual Report for the year: 2024  
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.

1. Entity ID Number <b>487916</b>		2. Exact name of the Limited Liability Company <b>RHODE ISLAND R.E.I.T., LLC</b>			
3. NAICS Code <b>531311</b>		4. Brief description of the character of business conducted in Rhode Island <b>Real estate management</b>			
5. State of Formation <b>RI</b>					
6. Principal Office Address <b>c/o Restivo Monacelli, LLP, 36 Exchange Street</b>			City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <b>Stephen J. DiGianfilippo</b>			Contact Title <b>Attorney</b>		
Street Address <b>50 Park Row West, Suite 107</b>			City <b>Providence</b>	State <b>RI</b>	Zip <b>02903</b>
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.					
9. <i>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.</i>					
Name of Authorized Person <b>Donna M. Rizzo, Manager</b>				Date <b>4-1-24</b>	
Signature of Authorized Person 					

FILED

APR 22 2024  
BY ML 33289

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MAIL TO:  
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