

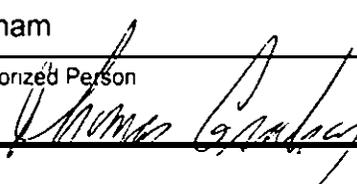


State of Rhode Island
Department of State - Business Services Division

REC'D RIDOS BSD
24 APR 19 AM 11:27:04

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 001707340		2 Exact name of the Limited Liability Company Walden RI, LLC	
3 NAICS Code 531390		4. Brief description of the character of business conducted in Rhode Island Any lawful business, unless a more limited purpose is adopted by amendment to the Articles of Organization and/or the operating agreement.	
5 State of Formation RI			
6 Principal Office Address 4 Clinton Square		City Syracuse	State NY
Zip 13202			
7 Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Thomas Graham		Contact Title Authorized Person	
Street Address c/o Pyramid, 4 Clinton Square		City Syracuse	State NY
Zip 13202			
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 Thomas Graham			Date 4/18/2024
Signature of Authorized Person 			

FILED

APR 19 2024

BY 21299

AR

MAIL TO:
Division of Business Services
148 W River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.n.gov