		e of Rhode Isl the Secretary		Fee: \$50.00
Division Of Business Services				
148 W. River Street				
	Provi	dence RI 02904-	2615	
(401) 222-3040				
Limited Liability Company				
Annual Report Filing Period: February 1 - May 1				
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or				
refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.				
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024				
<b>1. ID No.</b> <u>001740583</u>				
2. Exact Name of the Limited Liability Company <u>Umbrella Company LLC</u>				
3. State of Formation				
State: <u>RI</u>				
NAICS CODE				
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.				
<u>531390</u>				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
HOLD, OWN, BUY, SELL, LEASE, MORTGAGE AND MANAGE REAL ESTATE				
5. Principal Off	ice Address			
No. and Street:	55 PINE STREET			
	FIFTH FLOOR			
City or Town:	PROVIDENCE	State: <u>RI</u>	Zip: <u>02903</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: THOMAS J. MOYLAN Contact Title: No. and Street: 171 MILK STREET				
City or Town:	<u>SUITE 3B</u> BOSTON	State: MA	Zip: <u>02109</u>	Country: <u>USA</u>
City or Town:	BOSTON	State: MA	Zip: <u>02109</u>	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

THOMAS J. MOYLAN 55 PINE STREET FIFTH FLOOR PROVIDENCE , RI 02903

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

**Signed this 3 Day of May, 2024 at 6:33:01 AM 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 THOMAS J. MOYLAN

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2024 State of Rhode Island All Rights Reserved