



State of Rhode Island  
Department of State - Business Services Division

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.

**FILED**  
STAMP  
MAY 03 2024  
BY [Signature]  
[Signature]

1. Entity ID Number <b>001739733</b>		2. Exact name of the Limited Liability Company <b>6 Larchmont LLC</b>	
3. NAICS Code <b>531110</b>		4. Brief description of the character of business conducted in Rhode Island <b>Real Estate Rental Property</b>	
5. State of Formation <b>RI</b>			
6. Principal Office Address <b>127 CATHEDRAL DRIVE</b>		City <b>ATTLEBORO</b>	State <b>MA</b>
Zip <b>02703</b>			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>Edward G. McAdams</b>		Contact Title	
Street Address <b>127 CATHEDRAL DRIVE</b>		City <b>ATTLEBORO</b>	State <b>MA</b>
Zip <b>02703</b>			
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. 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.			
Name of Authorized Person <b>Edward G. McAdams</b>		Date <b>March 26, 2024</b>	
Signature of Authorized Person <i>Edward G. McAdams</i>			

**MAIL TO:**  
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