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State of Rhode Island Department of State - Business Services Division

Annual Report for the year: Limited Liability Company

2022

- → 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	2. Exact name of the Limited Liability Company				
01705439	401 Old River Road, LLC				
3. NAICS Code 531110	Brief description of the character of business conducted in Rhode Island Residential property rental				
5. State of Formation Rhode Island					
6. Principal Office Address		City	State	Zip	
8 Stonybridge Drive		Lincoln	RI	02865	
7. Mailing Address of Limi	ted Liability Company and Nam	e or Title of Contact Person			
Contact Name Douglas E. Albert		Contact Title Authorized Person			
Street Address 8 Stonybridge Drive		City Lincoln	State RI	^{Zip} 02865	
8. The Resident Agent Inf	ormation currently of record wit	h the RI Department of State is ac	curate. Changes requi	re filing Form 642.	
9 Under penalty of peri	ury, I declare and affirm that i statements contained herein	have examined this report, incl	uding any accompan	ying schedules and	
Name of Authorized Person			Date		
Douglas E. Albert			5/3/24		

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MAY 2 3 2024

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.rl.gov