RI SOS Filing Number: 202455284530 Date: 6/3/2024 4:00:00 PM



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.

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1. Entity ID Number 001732971	2. Exact name of the Limited Liability Company MEOX MIX II, LLC 4. Brief description of the character of business conducted in Rhode Island REAL ESTATE ACQUISITION, INVESTMENT, MANAGEMENT, AND HOLDINGS				
3. NAICS Code 531110					
5 State of Formation RHODE ISLAND					
6. Principal Office Address		City	State	Zip	
31 BAKER STREET		WARREN	RI	02885	
7. Mailing Address of Limite	ed Liability Company and Name of	or Title of Contact Person			
Contact Name		Contact Title MEMBER			
Street Address 225 ADELAIDE AVENUE		City PROVIDENCE	State RI	Zip 02907	
8. The Resident Agent infor	mation currently of record with th	ne RI Department of State is accura	ate. Changes requir	e filing Form 642.	
	l declare and affirm that I have tatements contained herein are	examined this report, including e true and correct.	any accompanyir	ng schedules and	
Name of Authorized Person			Date (/	actor	
PETER KARCZMAR	•	1 3/40/2034			
Signature of Authorized Pe	rson	human	<u> </u>		

JUN -3 2024 BY 12261

MAIL TO:

Division of Business Services

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

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