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State of Rhode Island Department of State - Business Services Division

RECEIVED SECRETARY OF STATE CORPORATIONS DIV

2024 JUN 11 PM 1: 06

Annual Report for the year: 2018
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	2. Exact name of the Limited Liability Company			
764712	MADNE HOWENGS LLC			
3. NAICS Code	MADNE HOWENGS LLC 4. Brief description of the character of business conducted in Rhode Island			
53 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	REAL ESTATE HOWENES			
RI				
6. Principal Office Address		City	State	Zip
4433 POST ROND		EAST GREINWELH	AZ	02818
	ability Company and Name or Title	e of Contact Person		
Contact Name		Contact Title		
DECANO BROOKS		City State Zip EAST GREENWEEK: RE 02818		
Street Address		City	State	Zip
4433 POST ROM		EAST GREENWEEK	RE	02818
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	·		Date	/ ,
DELAN	10 BROOKS	5/29/24		
Signature of Authorized Person	Newed 1			
		<u> </u>		,

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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

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