RI SOS Filing Number: 202455749570 Date: 6/13/2024 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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Entity ID Number	2. Exact name of the Limited Liability Company						
00/677170	Bucklin Plaza LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
33/370							
5: State of Formation	Shopping Center						
KI	Solehly						
6. Principal Office Address		City	State	Zip			
18 Linwood Ave		Providence	PI	02909			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name		Contact Title					
Mibuel Berista		Juner		<u> </u>			
Streen Address 10 LINWOOD AVE		City Providence	State	21p 07909			
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  M. 640 Ports			Date 6 / /3 /2 4				
Signature of Authorized Person  Musika Batta							
	_			<u> </u>			

FILED

JUN 1 3 2024

MAIL TO:

**Division of Business Services** 

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

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