RI SOS Filing Number: 202456028430 Date: 6/17/2024 4:00:00 PM



## State of Rhode Island Department of State - Business Services Division

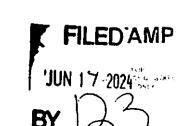
Annual Report fo≱the year: Limited Liability Company

2024

→ 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 Limit	ed Liability Company		
001747419	CHACON REAL	•		
001747413	CHACON REAL	11, LLO		
3. NAICS Code	4. Brief description of the o	4. Brief description of the character of business conducted in Rhode Island		
531110	REAL ESTATE			
5. State of Formation	<del> </del>	•		
RHODE ISLAND				
6. Principal Office Address		City	State	Zip
154 ATWELLS AVENUE		PROVIDENCE	RI	02903
7. Mailing Address of Limited	d Liability Company and Name o	or Title of Contact Person		
Contact Name LUZ CHACON		Contact Title MANAGER		
Street Address 132 PUTNAN STREET		City PROVIDENCE	State RI	<sup>Zip</sup> 02909
8. The Resident Agent inform	nation currently of record with th	e RI Department of State is accurate	e. Changes requir	e filing Form 642.
	r, I declare and affirm that I havatements contained herein are	ve examined this report, including	ј апу ассотрапу	ing schedules and
Name of Authorized Person			Date	
Name of Authorized Person	LUZ CHACON		11/30/2023	

## MAIL TO:

Division of Business Services

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

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