

State of Rhode Island

Department of State - Business Services Division

Annual Report for the year:
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	2. Exact name of the Limited Liability Company				
000995231	House Forthe community LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
5311m	Haiseing, renter,				
5. State of Formation	1	•			
$\mathcal{L}\mathcal{I}$					
6. Principal Office Address		City	State	Zip	
665 pharles	37	Pur	RI	029001	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Office Contact Title Contact Title DITTO (1) 2 1					
Contact Mame		Contact Title	O3 11	PADE NON DUE	
mario 1	Maucebo	Diselor	\mathcal{D} .	-14-5UB\$T#	
Street Address		City	State	Zip	
665 Charle	5 Street	Pw.	RJ	02904	
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	/ /	
mario man cepo 6/27/24					
Signature of Authorized Person					
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FILED

JUN 2 7 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