



State of Rhode Island

Department of State - Business Services Division

STATE

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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.

| | | | | |
|---|--|--|----------------------|--------------|
| 1. Entity ID Number 001741357 | | 2. Exact name of the Limited Liability Company DEVINE OPEN STUDIO, I.L.C. | | |
| 3. NAICS Code 531210 | | 4. Brief description of the character of business conducted in Rhode Island Purchase, own, develop, manage and sell real estate | | |
| 5. State of Formation RHODE ISLAND | | | | |
| 6. Principal Office Address 57 WATER STREET | | City WARREN | State RI | Zip 02885 |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | | |
| Contact Name | | Contact Title MEMBER | | |
| Street Address 57 WATER STREET | | City WARREN | State RI | Zip 02885 |
| 8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642. | | | | |
| 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 Nancy M. Devine | | | Date June 4, 2024 | |
| Signature of Authorized Person <i>Nancy Devine</i> | | | | |

FILED

AUG 15 2024

BY 12305T

ABC

MAIL TO:
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