RI SOS Filing Number: 202458959480 Date: 8/19/2024 11:49:00 AM



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.



1. Entity ID Number	2. Exact name of the Limited Liability Company			
000795808	319 BALD HILL ROAD, LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
531120	Strip Mall			
5. State of Formation				
Rhode Island				
6. Principal Office Address	City	,	State	Zip
P.O. Box 384		understown	RI	02874
7. Mailing Address of Limite	ed Liability Company and Name or Title of Co	ontact Person		
Contact Name	Cor	Contact Title		
Eileen C.	zzi	Managing Partner		
Street Address PO Box 384		Sau nderstown	State RI	^{Zip} 02874
8. The Resident Agent info	mation currently of record with the RI Depart	tment of State is accurate	e. Changes requir	e filing Form 642.
	y, I declare and affirm that I have examin tatements contained herein are true and		any accompany	ring schedules and
Name of Authorized Person		Date		
Eileen C. Izzi			8/16/2024	
Signature of Authorized Pe	<u> </u>			
Ellen C	· Sar			
CELL PHONE 4	· 990 01-829-0981			

FILED

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ENVIE POR CORREO POSTAL A: Business Services Division

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