

State of Rhode Island Department of State - Business Services Division

Annual Report for the year: <u>2022</u>
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				
001720100	Stay New Port LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
531190 5. State of Formation	Vacation Management Company (Vacation homes)				
RI	(Vacation	names)			
6. Principal Office Address		City	State	Zip	
33 clayton	St	Middletun	KI	02842	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name		Contact Title			
BriannaF	errara_	owner			
Street Address 33 Clay	Hon St	City Middleton		02812	
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 10/16	2024	
Signature of Authorized Person TOMUM ROTUSTAN					

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov OCT 17 2024 BY WPNS 2-PA. 3:46 pm.