RI SOS Filing Number: 202461186420 Date: 11/18/2024 3:33:00 PM



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

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Annual Report for 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.

Entity ID Number	2. Exact name of the Limited Liability Company				
001743816	52 Pine Street LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island     Ownership and Operation of Restaurant/Bar Establishment				
722511					
5. State of Formation	]				
RI					
6. Principal Office Address		City	State	Zip	
1547 Fall River Ave, Suite 2B		Seekonk	MA	02771	
7. Mailing Address of Limited Li	ability Company and Name or	Title of Contact Person			
Contact Name David Darling		Contact Title Manager			
Street Address 1547 Fall River Ave, Suite 2B		City Seekonk	State MA	<sup>Zip</sup> 02771	
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, 1 statements, and that all state			ding any accompany	ing schedules and	
Name of Authorized Person			Date	Date	
Michael E. Levinson, Esq.			11/15/2024		
Signature of Authorized Person	M	)	•		

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED 3:33

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