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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.

1 Entity ID Number	2. Exact name of the Limited Liability Company					
001750568	27 Libera, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island Acquisition and rental of commercial property					
531120						
5. State of Formation						
Rhode Island						
6. Principal Office Address	<u></u>	City	State	Zıp		
27 Libera Street		Cranston	RI	02920		
7 Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Lori Manni		Contact Title Member				
Street Address 27 Libera Street, Suite 1		City Cranston	State RI	^{Zip} 02920		
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	Date		
Lori Manni		12/6/2024				
Signature of Authorized Person						

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 11:47 DEC 09 2024 BY AV795