

Department of State - Business Services Division

STAMP

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Annual Report for the year: 2025 **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			
001754319	CARDINAL ELEVEN 11, LLC			
3. NAICS Code 531110	Brief description of the character of business conducted in Rhode Island INVESTMENT / REAL ESTATE			
5. State of Formation				
6. Principal Office Address	Ci	ty	State	Zip
PO BOX 505	L	NCOLN	RI	02865
7. Mailing Address of Limite	d Liability Company and Name or Title of C	Contact Person	I	
Contact Name BENJAMIN RICCI		Contact Title OWNER		
Street Address PO BOX 505		y LINCOLN	State RI	^{Zip} 02865
8. The Resident Agent infor	mation currently of record with the RI Depa	irtment of State is accui	rate. Changes require	e filing Form 642.
, , , ,	y, I declare and affirm that I have exami extements contained herein are true and	•	ling any accompany	ing schedules and
Name of Authorized Person			Date	
BENJAMIN RICCI			12/13/2024	
Signature of Authorized Per	son		•	-

MAIL TO:

Division of Business Services

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BY LISS OCHOW