RI SOS Filing Number: 202461679850 Date: 12/17/2024 3:05:00 PM State of Rhode Island Department of State - Business Services Division 2022 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.

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	Entity ID Number     2. Exact name of the Limited Lia	ability Company			
	001658214 (15ADORA )	650214 (MSAZORA HUNESIMENTS, LLC			
	3. NAICS Code  4. Firef description of the character of business conducted in Rhode Island  FAL ESTATE LEWITH - RESIDENTIAL				
	5. State of Formation	, - , - ,	•		
	6. Principal Office Address	City	State	Zip	
	123 Island Park De	CHARLESTON	SC	29492	
	7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
	Contact Name	Contact Title		<u> </u>	
	DORGEN SUDFRON	MEMBER			
	Street Address Island PARIC DR.	MEMBER CHARLESTEN	State	7029492	
	8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require fling Form 642:				
หาก จึงเกิดของ เพาะสาร	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		Daie		
An experience of the control of the	Direco SANDERSON		12/22/24		
, ,	Signature of Authorized Person 2			,	

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