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## State of Rhode Island

**Department of State - Business Services Division** 

Annual Report for the year: 2022 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 Limit	2. Exact name of the Limited Liability Company				
001728807	Hope Artiste Residential Proprietor, LLC					
3. NAICS Code 531190	Brief description of the character of business conducted in Rhode Island     Real Estate Holding Company					
5. State of Formation Rhode Island						
6. Principal Office Address	<u></u>	City	State	Zlp		
200 Esten Avenue		Pawtucket	RI	02860		
7. Malling Address of Limited Li	ability Company and Name o	Title of Contact Person				
Contact Name RoseAnne DeAngelis		Contact Title Assoc. Director				
Street Address PO Box 100843		Cranston	State RI	<sup>Z1p</sup> 02910		
8. The Resident Agent informati	ion currently of record with the	e RI Department of State is acc	urate. Changes requir	re filing Form 642		
9. Under penalty of perjury, I destatements, and that all states	declare and offirm that I hav	ve examined this report. Inclu-	ding any accompan	ring schedules end		
Name of Authorized Person			Date	Date		
Aaron Iskowitz			07/02/2024			
Signature of Authorized Person						
	2					

**FILED** 

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MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.n.gov BY NHQOQ