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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

2025

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→ 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 001693210	2. Exact name of the Limited Liability Company 485 METACOM LLC				
3. NAICS Code 531120	Brief description of the character of business conducted in Rhode Island OWN AND MANAGE COMMERCIAL REAL ESTATE				
5. State of Formation RHODE ISLAND					
6. Principal Office Address 32 LORRAINE STREET		City BARRINGTON	State RI	Zip 02806	
7. Mailing Address of Limited Lia	bility Company and Name	or Title of Contact Person	<u> </u>		
Contact Name EDWARD J C	OX II	Contact Title MANAGER			
Street Address 32 LORRAINE STREET		City BARRINGTON	State RI	^{Zip} 02806	
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 destatements, and that all statem	eclare and affirm that I ha ents contained herein ar	eve examined this report, including true and correct.	any accompany	ing schedules and	
Name of Authorized Person EDWARD J COX II		Date 01/10/2025			
Signature of Authorized Po son	Ent				

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov JAN 1 4 2025 BY 8535