

RI SOS Filing Number: 202563345680 Date: 1/27/2025 4:00:00 PM



## State of Rhode Island **Department of State - Business Services Division**

2025

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.

1. Entity ID Number 000138095		2. Exact name of the Limited Liability Company KENMARE GROUP, LLC			
3. NAICS Code 531120		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE AND OTHER INVESTMENTS			
5. State of Formation RHODE ISLAND					
6. Principal Office Address		City	State	Zip	
95 West St. Suite 1613		WALPOLE	MA	02081	
7. Mailing Address of Limited	Liability Company and Name	or Title of Contact Person		<del>L</del>	
Contact Name JACK SULLIVAN		Contact Title PARTNER			
Street Address 95 West St. Suite 1613		City WALPOLE	State ME	<sup>Zip</sup> 02081	
8. The Resident Agent inform	nation currently of record with	the RI Department of State is accu	ırate. Changes require	filing Form 642.	
	r, I declare and affirm that I hated atements contained herein a	ave examined this report, include re true and correct.	ding any accompanyi	ng schedules and	
Name of Authorized Person JOHN F SULLIVAN			Date JAN 24, 2025		
Signature of Authorized Pers	son f deli	(T)			

MAIL TO:

**Division of Business Services** 

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