Office of the Secretary of State         Division Of Business Services         148 W. River Street         Drovidence RI 02904-2615         (401) 222-3040         Limited Liability Company         Annual Report         Providence RI 02904-2615         (401) 222-3040         Limited Liability Company failing or         action of February 1 - May 1         In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or         action of the ins annual report within thirty (30) days after the time prescribed by         Jaw (R.I.G.L. 7-16-66(d), each limited liability company failing or         action of the Secretary of State         ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2025: 2025         1. ID No. 001335531         2. Exact Name of the Limited Liability Company Vintage Construction Management, LLC         3. State of Formation         State: SC         NAICS CODE         Enter the six digit NAICS Code that best describes the primary business conducted by the entity.         Download the list of codes here. More information on NAICS cond         236220 <td cols<="" th=""><th></th><th>Fee: \$50.00</th></td>	<th></th> <th>Fee: \$50.00</th>		Fee: \$50.00
Providence RI 02904-2615     (401) 222-3040  Limited Liability Company Annual Report Filing Period: February 1 - May 1 In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or redusing to file fls annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.  ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2025: 2025  1. ID No. 001335531 2. Exact Name of the Limited Liability Company Vintage Construction Management, LLC 3. State of Formation State: SC     NAICS CODE Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online. 236220 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island GENERAL CONTRACTOR COMPLETING RETAIL SPACE BUILD OUTS 5. Principal Office Address No. and Street: 17 IDLEWOOD DRIVE City or Town: GREENVILLE State: SC Zip: 29609 Country: USA 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person: Contact Name: TYLER AMEY Contact Title: No. and Street: DO BOX 1012 City or Town: GREENVILLE State: SC Zip: 29602 Country: USA 7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER			
(401) 222-3040         Limited Liability Company         Annual Report         Filing Period: February 1 - May 1         In accordance with R.I.G.L. 7-16-66(bd; each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(bd; each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(bd; each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(bd; each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(bd; each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(bd; each limited liability company failing or refusing the of \$25.00.         ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2025: 2025         ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2025: 2025         ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2025: 2025         State: SC         State: SC         NAICS CODE         Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online.         2366220         4. Brief Description of the Character of the Busi			
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	No. and Street: PO BOX 1012	<u>5A</u>	
NATIONAL REGISTERED AGENTS, INC. 450 VETERANS MEMORIAL PARKWAY, SUITE 7A			

EAST PROVIDENCE , RI 02914

## 8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 2 Day of February, 2025 at 10:31:23 AM by the authorized person. This

electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

By <u>TYLER AMEY</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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