

FEB 0 3 2025 BY A BY

Annual Report for the year: 2025
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 Liability Company				
001781372	429 ATLANTIC AVENUE, LLC 4. Brief description of the character of business conducted in Rhode Island				
3. NAICS Code					
531311	Manage Real Estate	Manage Real Estate			
5. State of Formation					
Rhode Island					
6. Principal Office Address		City	State	Zıp	
187 Beech Street		Eastchester	NY	10709	
7. Mailing Address of Limite	d Liability Company and Name or		•		
Contact Name Jon D. Lallo		Contact Title Agent			
Street Address 42 Granite Street		City Westerly	State RI	^{Zip} 02891	
8. The Resident Agent infor	mation currently of record with the	RI Department of State is acc	urate. Changes require	e filing Form 642	
	l declare and affirm that I have e tatements contained herein are t		ng any accompanying	g schedules and	
Name of Authorized Person			Date /	Date /	
Charles N Violino			01/27/	01/27/2025	
Signature of Authorized Per	son				
Marley 1 / rolling	<u></u>				

MAIL TO:

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

Phone: (401) 222-3040 Website: www.sos.ri.gov