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

2025 FEB 5 P 12:30

1. Entity ID Number	2. Exact name of the Limited Liability Company		
001671609	Southmayd LLC		
3. NAICS Code: 53	4. Brief description of the character of business conducted in Rhode Island: Own & Rent a 4 Unit Condominium Complex in Newport RI		
5. State of Formation: RI			
6. Principal Office Address: 1004 Boston Neck Rd Ste 6	City: Narragansett	State: RI	Zip: 02882
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name: Tom Santilli	Contact Title: member		
Street Address: 1004 Boston Neck Rd Ste 6	City: Narragansett	State: RI	Zip: 02882
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 declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.***			
Name of Authorized Person: Thomas A Santilli		Date: 1/29/25	
Signature of Authorized Person			

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