State of Rhode Isla Department of S	nd State - Business Service	s Division			
Annual Report for the year: Limited Liability Company → Filing period: February 1 → Filing Fee: \$50.00	2020_			2025 FEB -5 P	CO.,P.J.ATI
				:21	55765 02
1. Entity ID Number	2. Exact name of the Limited Lia			36	
1001671609	Southmay	d LLC		* .	,
3. NAICS Code	4 Brief description of the char	otor of business appropriated in Dha	de Island	•	
 53	nun · Rant	C 4 Unit (New port 7	onlowi	กแก	2
5. State of Formation		Nowart 7	0		•
RI	(on plex V	The pure			
6. Principal Office Address		City	State	Zip	
1004 Boston	Meck Rd Sk	6 Narrycosett	RI	029	572
	ability Company and Name or Title	,			
Contact Name		Contact Title			
10m Jant	111	member			
Street Address City State			State	Z:p	
8. The Benident American et	led Rol Steb	nuvegersett	F1	03	610
		Department of State is accurate. C			
statements, and that all staten	nents contained herein are true	amined this report, including an and correct.	y accompanyin	g schedu	iles and
Name of Authorized Person Date			Date		<u> </u>
Things A Sortilli 1/20				125	
Signature of Authorized Person			- /	<i></i>	

FILED

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov FEB 5 2025

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FORM 632 - Revised: 12/2023