RI SOS Filing Number: 202565317810 Date: 2/17/2025 4:00:00 PM

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

FILED

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.

1. Fntity ID Number	2. Exact name of the Limit	2. Exact name of the Limited Liability Company				
001702101	1587 Plainfield Associates, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island FACINE (REALTAL OF RECORDED TIES)					
531190	LEASING/RENTAL OF PROPERTIES					
5. State of Formation						
RI						
6. Principal Office Address		City	State	Zip		
412 Tunk Hill Road		Scituate	RI	02831		
7. Mailing Address of Limite	ed Liability Company and Name of	r Title of Contact Person	-			
Contact Name TAMMY CARDILLO		Contact Title MEMBER				
Street Address 412 Tunk Hill Road		City Scituate	State RI	^{Zip} 02831		
8. The Resident Agent infor	mation currently of record with th	e RI Department of State is acc	curate. Changes requi	re filing Form 642.		
	y, I declare and affirm that I ha tatements contained herein are		iding any accompan	ying schedules and		
Name of Authorized Person			Date			
TAMMY CARDILLO			2-6-25			
Signature of Authorized Pe	rson A					

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

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