RI SOS Filing Number: 202565779050 Date: 2/24/2025 4:00:00 PM



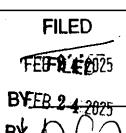
State of Rhode Island **Department of State - Business Services Division**

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. Entity ID Number	2. Exact name of the Limited Liability Company				
001711221	_	139 Beavertail LLC			
3. NAICS Code	4. Brief description of the c	4. Brief description of the character of business conducted in Rhode Island			
531390	Real Estate			:	
5. State of Formation				1	
RI					
6. Principal Office Address		City	State	Zip	
122 Touro Street		Newport	RI	02840	
7. Mailing Address of Limite	ed Liability Company and Name or	r Title of Contact Person			
Contact Name Michael W. Miller		Contact Title Registered Agent			
Street Address 122 Touro Street		City Newport	State RI	^{Zip} 02840	
8. The Resident Agent infor	mation currently of record with the	e RI Department of State is acci	urate. Changes requir	re filing Form 642.	
	y, I declare and affirm that I hav tatements contained herein are		ding any accompany	ying schedules and	
Name of Authorized Person			Date		
STUART AUERBACCH			2-6-2025		
Signature of Authorized Peo			•		

MAIL TO:

Division of Business Services

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

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