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

Annual Report for the year: Limited Liability Company 2025

-> 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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I. Entity ID Number 2. Exact name of the Limited Liability Company							
1757902	Cove Homes Frenchtown						
3. NAICS Code 53 \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	4. Brief description of the character of business conducted in Rhode Island To acquire, develop, manage, operate, invest and deal with interest in real property either in its own capacity or as a member in any LLP/LP organized to undertake the same and engage in any activities related to RI Regulations						
5. Principal Office Address	<u> </u>	City	State	Zip			
146 First Avenue		East Greenwich	RI	02818			
7. Mailing Address of Limited I	lability Company and Name or Title	of Contact Person					
Contact Name Tracy L. Johnson		Contact Title Managing Agent					
Street Address 146 First Avenue		Chy East Greenwich	State RI	Zp 02818			
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		Date					
Tracy L. Johnson			2/25/2025				
Signature of Authorized Person	n						

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MAIL TO:

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

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

FORM 632 - Revised: 12/2023