

State of Rhode Island Department of State - Business Services Division

FILED STAME

Annual Report for the year: 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

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Entity ID Number	2. Exact name of the Lim	2. Exact name of the Limited Liability Company				
001781915	2448 East Main,	2448 East Main, LLC				
3. NAICS Code 531390	4. Brief description of the Real Estate	Brief description of the character of business conducted in Rhode Island Real Estate				
5. State of Formation Rhode Island						
6. Principal Office Address		City	State	Zip		
195 Newport Harbor Drive		Portsmouth	RI	02871		
7. Mailing Address of Limit	ed Liability Company and Name	or Title of Contact Person		_		
Contact Name Kenneth Navarro		Contact Title Operating Manager				
Street Address 195 Harbor Drive		City Portsmouth	State	^{Zip} 02871		
8. The Resident Agent info	rmation currently of record with t	he RI Department of State is accur	ate. Changes requir			
	ry, I declare and affirm that I h statements contained herein a	ave examined this report, includi	ng any accompany	/ing schedules aı		
Name of Authorized Perso		e true and consett.	Date /			
Kenneth Navarro			2/2	~/sc-		

MAIL TO:

Division of Business Services

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