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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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(4)	A Secretary of the secretary	
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•	BY	
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1. Entity ID Number 1745847		2. Exact name of the Limited Liability Company Feeley Equity Group, LLC 4. Brief description of the character of business conducted in Rhode Island Manage Real Estate				
3. NAICS Code 531311						
5. State of Formation Rhode Island						
6. Principal Office Address 71 Sebille Road		City Smithfield	State RI	Zip 02917		
7. Mailing Address of Limite	ed Liability Company and Name o	r Title of Contact Person	· •	•		
Contact Name Patrick Feeley		Contact Title Operating Manager				
Street Address 71 Sebille Road		City Smithfield	State RI	^{Zip} 02917		
8. The Resident Agent info	mation currently of record with th	e RI Department of State is accur	rate. Changes requir	e filing Form 642.		
	I declare and affirm that I have tatements contained herein are		g any accompanyin	g schedules and		
Name of Authorized Person	n	<u> </u>	Date	_		
Patrick Feeley			- /	-21.25		
Signature of Authorized Pe	rson The T	2				

MAIL TO:

Division of Business Services

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

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