

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

2025 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.

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1. Entity ID Number	2. Exact name of the Limited Liability Company				
001743127	275 Honeyman Avenue LLC				
3. NAICS Code 721191	l	Brief description of the character of business conducted in Rhode Island airbnb (short term rentals)			
5. State of Formation RI					
6. Principal Office Address	· · · · · · · · · · · · · · · · · · ·	City	State	Zip	
275 Honeyman Avenue		Middletown	RI	02842	
7. Mailing Address of Limit	ed Liability Company and Name or T	itle of Contact Person	<u>_</u>		
Contact Name Cynthia Murray		Contact Title Manager			
Street Address 40 Ward Ave		City Middletown	State RI	Zip 02842	
8. The Resident Agent info	rmation currently of record with the F	RI Department of State is accura	te. Changes require	e filing Form 642.	
9. Under penalty of perjustatements, and that all s	ry, I declare and affirm that I have tatements contained herein are tr	examined this report, including and correct.	ng any accompany	ing schedules and	
Name of Authorized Person			Date		
Cynthia Murray			2/21/2025		
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MAIL TO:

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