RI SOS Filing Number: 202566462050 Date: 3/6/2025 2:41:00 PM

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

2024

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.

1. Entity ID Number 001689304	2. Exact name of the Limited Liability Company DICKENS, LLC				
3. NAICS Code 531110	4. Brief description of the REAL ESTATE IN	Brief description of the character of business conducted in Rhode Island REAL ESTATE INVESTING.			
5. State of Formation RI				<u> </u>	
6. Principal Office Address 5 MERCHANT STREET		City SHARON	State MA	Zip 02067	
7, Mailing Address of Limite	d Liability Company and Name	or Title of Contact Person			
Contact Name IBRAHIM T. ALGUR		Contact Title MEMBER			
Street Address 5 MERCHANT STREET		City SHARON	State MA	<sup>Zip</sup> 022067	
8. The Resident Agent infor-	nation currently of record with t	he Ri Department of State is accu	rate. Changes require	filing Form 642.	
9 Under penalty of periur	y, I declare and affirm that I ha atements contained herein ar	ave examined this report, includ	fing any accompany	ing schedules and	
Name of Authorized Person IBRAHIM ALGUR			Date 3.6.2025		
Signature of Authorized Per	son Ash				

FILED

MAR 0 6 2025

MAIL TO:

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

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