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## State of Rhode Island

## Department of State - Buşiness Services Division

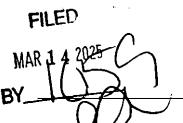
Annual Report for the year: Limited Liability Company

20245

→ 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	2. Exact name of the Lim	2. Exact name of the Limited Liability Company				
001731798	Forty Nine Sako	Forty Nine Sakonnet LLC				
3. NAICS Code	4. Brief description of the	4. Brief description of the character of business conducted in Rhode Island				
531110	Rental of Resident	Rental of Residential Property				
5. State of Formation						
Florida						
6. Principal Office Address	1	City	State	Zip		
453 Pinewood Lake Drive		Venice	FL	34285		
7. Mailing Address of Limite	d Liability Company and Name	or Title of Contact Person				
Contact Name	tact Name		Contact Title			
Eric Bisigh	ini	Chief Financial Officer				
Street Address 453 Pinewood Lake Drive		City Venice	State FL	<sup>Zip</sup> 34285		
8. The Resident Agent infor	mation currently of record with t	the RI Department of State is acc	turate. Changes requir	e filing Form 642.		
	y, I declare and affirm that I h atements contained herein a	ave examined this report, inclure true and correct.	iding any accompan	ying schedules and		
Name of Authorized Person			Date			
Eric Bisighini			3/11/202	3/11/2025		
Signature of Authorized Per	son Eni d. B	isfiin & C.	.F.O			

**Division of Business Services** 

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