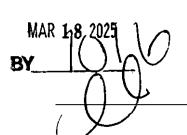


## State of Rhode Island **Department of State - Business Services Division**

**FILED** 

Annual Report for the year: 2025 **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.



Entity ID Number	2. Exact name of the Limite	ed Liability Company			
1739006	MAT Enterprises,	MAT Enterprises, LLC			
3. NAICS Code 531390	1	4. Brief description of the character of business conducted in Rhode Island For the purpose of purchasing, renovating, developing, leasing, managing and selling real estate or otherwise dealing in any and all investment opportunities.			
5. State of Formation Rhode Island					
6. Principal Office Address		City	State	Zip	
135 New Road		Exeter	RI	02822	
7. Mailing Address of Limite	ed Liability Company and Name or	Title of Contact Person	·		
Contact Name Michael		Contact Title Tortolano			
Street Address 135 New Road		City Exeter	State RI	<sup>Zip</sup> 02822	
8. The Resident Agent info	rmation currently of record with the	RI Department of State is ac	curate. Changes requi	re filing Form 642.	
9. Under penalty of perju	ry, I declare and affirm that I hav	e examined this report, incl true and correct.	uding any accompan	ying schedules and	
statements, and that all s	tatements sometimes mereni sie				
statements, and that all s Name of Authorized Person	<del></del>	<u></u>	Date	8/2025	

MAIL TO:

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

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