State of Rhode Island
Department of State - Business Services Division

FILED STAMP
MAR 20 2025
BY

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.

1. Entity ID Number	2. Exact name of the Limited Liability Company		
1704335	Pokanoket, LLC		
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island		
531110	To hold real estate		
5. State of Formation			
RI			
6. Principal Office Address	City	State	Zip
5 Bull Crossing	Warren	RI	02885
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Steven Machado	Contact Title Manager		
Street Address 5 Bull Crossing	City Warren	State RI	Zip 02885
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.			
Name of Authorized Person	Date		
Steven Machado	3-8-2025		
Signature of Authorized Person			
X			

MAIL TO:
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