

State of Rhode Island

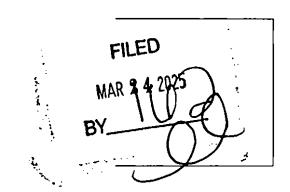
Department of State - Business Services Division

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			
001764801	Post & Main, LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
531110	OWNERSHIP AND MANAGEMENT OF RENTAL PROPERTIES			
5. State of Formation	┐			
RHODE ISLAND				
6. Principal Office Address	.	City	State	Zip
80 BOW STREET		EAST GREENWICH	RI	02818
7. Mailing Address of Limited	Liability Company and Name or Title	of Contact Person		
Contact Name MARA L. DERDERIAN		Contact Title MEMBER		
Street Address 80 BOW STREET		City EAST GREENWICH	State RI	^{Zip} 02818
8. The Resident Agent inform	ation currently of record with the RI D	Department of State is accurate. C	hanges require	filing Form 642.
	I declare and affirm that I have ext tements contained herein are true		y accompanyl	ng schedules and
Name of Authorized Person			Date	
MARA L. DERDERIAI	N		03/11/2025	
Signature of Authorized Pers				
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MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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