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State of Rhode Island Department of State - Business Services Division

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.

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1. Entity ID Number	2. Exact name of the Limited Liability Company						
00541895	MC HOLDINGS COMPANY UL						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
53 1190	I Lea Estate Investment and management						
5. State of Formation							
121							
6. Principal Office Address	•	City		State	Zip		
288 chad from St.		Providence		Ri	02908		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name		Contact Title					
clarissa cuped	member manager City State Zip						
Street Address		City	,	State	Zip		
289 Chad From Street		Providence		RI	02908		
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.							
9. 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			
Clarissa cepeda				4/10/2025			
Signature of Authorized Person							
Chi Dato							

FILED

APR 16 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