	Rhode Island Fee: \$50.00
Division Of H 148 W. Providence	Secretary of State Business Services River Street RI 02904-2615 222-3040
Limited Liability Company Annual Report Filing Period: February 1 - May 1	
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.	
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2025 : <u>2025</u>	
1. ID No. <u>001772010</u>	
2. Exact Name of the Limited Liability Company <u>94 Benefit Street, LLC</u>	
3. State of Formation	
State: <u>RI</u>	
NAICS CODE	
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.	
<u>531110</u>	
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island	
THIS LLC WAS FORMED TO HOLD REAL ESTATE ASSETS BUT NOTHING WAS EVER TRANSFERRED INTO THE LLC AND WE ARE PLANNING ON LIQUIDATING THE ENTITY.	
5. Principal Office Address	
No. and Street:94 BENEFIT STREETCity or Town:PROVIDENCE	State: <u>RI</u> Zip: <u>02904</u> Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:	
Contact Name: <u>TAYLOR POLITES</u> Contact Title:	ADMINISTRATOR
No. and Street:94 BENEFIT STREETCity or Town:PROVIDENCE	State: <u>RI</u> Zip: <u>02904</u> Country: <u>USA</u>

7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

TAYLOR MATTHEW POLITES 94 BENEFIT STREET PROVIDENCE , RI 02904

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 24 Day of April, 2025 at 10:20:48 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By TAYLOR M POLITES

Signature of Authorized Person

Form No. 632 Revised 09/07

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