1	State of Rhode Island  Department of State - Business Services Division
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Annual Report for the year:  $\frac{2025}{}$ **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.

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1. Entity ID Number 001665196	Exact name of the Limited Liability Company     Ponagansett 3, LLC					
3. NAICS Code 531311  5. State of Formation	Brief description of the character of business conducted in Rhode Island Real Estate					
6. Principal Office Address		City	State	Zip		
55 Ponagansett Ave		Providence	RI	02909		
7. Mailing Address of Limited	Liability Company and Nam	e or Title of Contact Person				
Contact Name Peter Bibby		Contact Title Member				
Street Address 55 Ponagansett	Ave	City Providence	State RI	Zip 02909		
8. The Resident Agent informa	ation currently of record with	the RI Department of State is accu				
statements, and that all state	leclare and affirm that I ha	ve examined this report including	ig any accompanyin	g schedules and		
Name of Authorized Person	Date	Date 9/17/37				
Peter Bibby		941	17/35			
Signature of Authorized Perso		1 Shily	<u> </u>			

MAIL TO:

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

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

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evised: 2/2023