RI SOS Filing Number: 202572892100 Date: 5/9/2025 4:00:00 PM



State of Rhode Island Department of State - Business Services Division

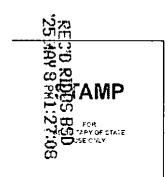
Annual Report for the year: 2025 Limited Liability Company

2025

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.



Entity ID Number	2. Exact name of the Limited Liability Company			
001689432	CLIFFSIDE INN, LLC			
3 NAICS Code 721110	Brief description of the character of business conducted in Rhode Island OPERATION AND MANAGEMENT OF A BOUTIQUE HOTEL AND INN			
5. State of Formation RHODE ISLAND				
6. Principal Office Address		City	State	Zip
2 SEAVIEW AVENUE		NEWPORT	RI	02840
7. Mailing Address of Limited	Liability Company and Name or Tit	le of Contact Person	1	1
CHARLES C HAJJAR		Contact Title MANAGER		
Street Address 30 ADAMS STREET		City MILTON	State	^{Zip} 02186
8. The Resident Agent informa	ation currently of record with the RI	Department of State is according	urate. Changes require	filing Form 642.
	I declare and affirm that I have e tements contained herein are tru	· ·	ding any accompany	ing schedules and
Name of Authorized Person			Date	
CHARLES C HAJJAR		04/25/2025		

FILED
MAY 0 9 2025 UV
BY 12510

MAIL TO:

Division of Business Services148 W. River Street, Providence, Rhode Island 02904-2615

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