State of Rhode Island
Department of State - Business Services Division

FILED STAMP
MAY 12 2025
BY

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
001755159	NOWA MANAGEMENT, LLC
3. NAICS Code: 445110	4. Brief description of the character of business conducted in Rhode Island: GROCERY STORE
5. State of Formation: RHODE ISLAND	

6. Principal Office Address	City	State	Zip
187 MESSER STREET	PROVIDENCE	RI	02909

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name	Contact Title		
NOEL NUNEZ	MANAGER		
Street Address	**City**	**State**	**Zip**
48 MARLBOROUGH AVENUE	PROVIDENCE	RI	02907

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
NOEL NUNEZ	02/04/2025

Signature of Authorized Person

MAIL TO:
Division of Business Services
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