	• • • • • •	of Rhode Isla he Secretary o		Fee: \$50.00
		Of Business Ser		
		3 W. River Street		
1636		ence RI 02904-2 401) 222-3040	013	
Limited Liability (Annual Report Filing Period: Februa				
refusing to file its an	R.I.G.L. 7-16-66(d), each lir nnual report within thirty (30 6(b&c)) is subject to a pena)) days after the t	time prescribed	
ANNUAL REPORT	YEAR - ENTER THE <u>CURRE</u>	<u>INT</u> FILING YEAR	2023 : <u>2023</u>	
1. ID No. <u>00029</u>	94650			
2. Exact Name of t	the Limited Liability Comp	any <u>WHITTIER</u>	MANAGEMI	ENT, LLC
3. State of Format	ion			
State: <u>RI</u>				
	NA	AICS CODE		
•	IAICS Code that best descri f codes <u>here.</u> More informa			• •
<u>523110</u>				
4. Brief Description Island	n of the Character of the B	usiness Which i	s Actually Cond	ducted in Rhode
	IN LISTED AND UNLIST		ES,ANGEL CA	APITAL
OPPORTUNITIES	S,THEATRICAL PRODU	<u>ICTIONS</u>		
5. Principal Office	Address			
No. and Street:	54 WHITTIER RD			
City or Town:	JAMESTOWN	State: <u>RI</u>	Zip: <u>02835</u>	Country: <u>USA</u>
6. Mailing Address	s of Limited Liability Compa	any and Name o	r Title of Conta	ct Person:
	<u>DWELL</u> Contact Title:			
Contact Name: LC No. and Street: City or Town:	<u>54 WHITTIER ROAD</u> JAMESTOWN	State: <u>RI</u>	Zip: <u>02835</u>	Country: USA

LOWELL THOMAS 54 WHITTIER ROAD JAMESTOWN , RI 02835

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

Signed this 3 Day of July, 2023 at 1:46:30 PM 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 <u>LOWELL THOMAS</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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