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State of Rhode Island Department of State - Business Services Division

FEB 1 2 2024

Annual Report for the year: 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.

2024

Entity ID Number	2. Exact name of the Limited Liability Company			
000512211	916 LLC			
3. NAICS Code	Brief description of the character of business conducted in Rhode Island Ownership and Development of Real Estate			
531390				
5. State of Formation	1			
RI				
6. Principal Office Address		City	State	Zip
1414 Atwood Avenue		Johnston	RI	02919
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Kelly Coates		Contact Title Authorized Trustee		
Street Address 1414 Atwood Avenue		City Johnston	State RI	^{Zip} 02919
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	
Kelly Coates			1/17/29	
Signature of Authorized Person / Athania / 184/KE				

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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