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State of Rhode Island Department of State - Business Services Division

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Annual Report for the year: Limited Liability Company

2024

FEB 2 0 2024

→ 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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Entity ID Number	2. Exact name of the Limited Lia	bility Company				
799101	DB Montos	MERY	GROUP	LLC		
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
531140 5. State of Formation	Roul estate sental					
6. Principal Office Address		City		State	Zip	
69 Mont	GUMERLY ST	PANTI	ICKET	RI	02860	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name BRIAN	FELAG	Contact Title Partner				
Street Address 69 Mon	Homery ST	city PAWT	ucket	State	^{z10} 02860	
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 .	N FRUAG			Date 2//	4/24	
Signature of Authorized Person Authorized Person						
10						

MAIL TO:

Division of Business Services

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

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