RI SOS Filing Number: 202448886220 Date: 3/12/2024 4:00:00 PM



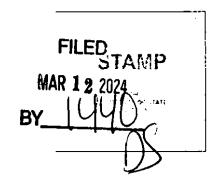
State of Rhode Island **Department of State - Business Services Division**

Annual Report for the year: 2024 **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			
000099863	Rholen West, LLC			
3. NAICS Code 531120	4. Brief description of the character of business conducted in Rhode Island Owning, operating, developing and dealing in real estate			
5. State of Formation Rhode Island				
6. Principal Office Address	I	City	State	Zip
99 Poppasquash Road		Bristol	RI	02809
7. Mailing Address of Limite	d Liability Company and Name	or Title of Contact Person		.
Contact Name Andrew T. Tyska		Contact Title		
Street Address 99 Poppasquash Road		City Bristol	State	^{Zip} 02809
8. The Resident Agent infor	mation currently of record with t	the RI Department of State is ac	curate. Changes requir	e filing Form 642.
	y, I declare and affirm that I h atements contained herein a	ave examined this report, inclore true and correct.	uding any accompany	ring schedules and
Name of Authorized Person			Date /	./
Andrew T. Ty	/ska		3/4	1/24
Signature of Authorized	son		- 1	

MAIL TO:

Division of Business Services

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

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