

A. Ralph Mollis, Secretary of State
Corporation Vibration
148 W. Richeston
Providence, RI 02404-2615

LIMITED LIAI Filing Period: Septen THIS REPORT MUST	nber 1 - November	1 • Filing Fee: \$5	L REPORT FOR TH 50.00 BLACK INK	E YEAR 26	008	
1741837	Exact name of the limited lic STOP &	SAS L.	L.C			
3. State of Formation	4. Brief description of	the character of the husines	ss which is actually conducted in Rhode Isl	and		
RI	Gae S	Haban Ee	convience -	Store		
5. Principal office address 959 WO 6. MAILING ADDRESS	Y WICK A	•	WAR WICK ME OR TITLE OF CONTACT PE	State RSON:	02809	
Sajid Lateet			Contact Tule	Contact Title DEMBER		
S cet Address 9 RAVIN	E RD	Marina and the second s	WAYLAND	State	01778	
	FILL IN SPACE	ES BEFORE USING AT	IABILITY COMPANY, IF APPLICATION OF A SECTION OF AMENDMENT, R.I.G. Manager Name	TTACHMENT)		
St at Address	-		Street Address			
СИу	State	Zip	Chy	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
Cuy	State	Zip	Сііу	State	Zip	
8. RESIDENT AGENT IN Agent Name RITA			ges require filing of Form 642 Address	- R.I.G.L. 7-16-11	1	
Address MC	ain gree	NDHI AVE	Cuy WARWICK	zφ R7	02886	

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

FILED
File Date NOV 05 2008
By: SV 1008
FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this eport, including any accompanying schedules and statements, and that all statements, contained herein are true and correct.

Signature of Authorized Person

10 19 08 Date

SAJID LA TEFF
Print or Type Name of Authorized Person

Form 632 Rev. 08