

A. Ralph Mollis, Secretary of State
Corporations Division
148 W. Rwer Street
Providence, Pt. (1904-2615

Providence, RI 02904-2615 401-222-3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2011

Filing Period: September 1 - November 1 - Filing Fee: \$50.00* - THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-16-66 (d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66 (b&c)) is subject to a penalty fee of \$25.00.

1. ID No.		Exact name of the limited liability company				
506775	Warren Art Spot	rren Art Spot, LLC				
3. State of Formation 4 Brief description of the character of the busin			ess which is actually conducted in Rhod	v Island		
RI Art instructions						
5. Principal office addre			City	State	Zip	
6 Child Street			Warren	RI	02885	
5. MAILING ADDR	ESS OF LIMITED LIABI	LITY COMPANY AND N	AME OR TITLE OF CONTACT	PERSON:	,	
Contact Name			Contact Title			
Julia H. Bush	<u> </u>		Manager			
Street Address			City	State	Ζιρ	
59 Irving Avenue			Providence	RI	02906	
lanager Name	FILL IN S	PACES BEFORE USING	LIABILITY COMPANY, IF APPI ATTACHMENTS ("X" BOX FO : Manager Name	R ATTACHMENT)		
Julia H. Bush			•			
Street Address			Street Address			
59 Irving Aver	nue					
Tity:	State	Zip	City	State	Zip	
Providence	RI	02906	:			
lanager Name			Manager Name			
Street Address			Street Address			
йу	State	Zip	СИу	State	Zip	
	I IT IN RHODE ISLAND	l	;	I	I	
his information is ci	urrently of record in the O	ffice of the Secretary of S	State. Changes require filing of Fo	orm 642 - R.I.G.L. 7-16-	·II 💊 🔐	
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This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

FILED
File Date
Check No. SEP 16 2011
By: 0 152155
BYFOR SECRETARY OF STATE USE ONLY

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.

Signaluse of Authorized Person Date

Julia H. Bush

Print or Type Name of Authorized Person