| State of Rhode Island and Providence Plantations Fee: \$50. Office of the Secretary of State | | | |
|---|--|-----------------------|-----------------------------|
| Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040 | | | |
| Limited Liability Comp Annual Report Filing Period: September 1 - J | | | |
| | 7-16-66(d), each limited liability comp thirty (30) days after the time presc enalty fee of \$25.00. | | |
| ANNUAL REPORT YEAR: 2013 | | | |
| 1. ID No. <u>000698132</u> | | | |
| 2. Exact Name of the Limited Liability Company LOVE LIGHTS, LLC | | | |
| 3. State of Formation | | | |
| State: <u>RI</u> | | | |
| 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island It is a toy company still in the research and development stages working on getting the official USPTO patents and trademarks for products and toy lines | | | |
| 5. Principal Office Address | 5 | | |
| No. and Street:173 LYMAN STREETCity or Town:PAWTUCKETState:RIZip:02860Country:USA | | | |
| 6. Mailing Address of Lim | ited Liability Company and Name | e or Title of Contact | t Person: |
| | ^{itle:} <u>LYMAN ST</u> <u>VTUCKET</u> State: <u>RI</u> | Zip: <u>02860</u> | Country: <u>USA</u> |
| 7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS | | | |
| Title | Individual Name | | ddress |
| | First, Middle, Last, Suffix | Address, City or Tow | n, State, Zip Code, Country |
| 8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11 | | | |
| MICHAEL FOGARTY 173 LYMAN STREET PAWTUCKET, RI 02860 | | | |
| 9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b). | | | |

Signed this 26 Day of September, 2013 at 9:09:47 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By <u>MICHAEL FOGARTY</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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