

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615 **Phone:** (401) 222-3040 > **Email:** corporations@sos.ri.gov > **Website:** www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2013

Filing Period: September 1 - November 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No.		2. Exact name of the limited liability company						
149858	Jonatha	Jonathan S. Pratt, LLC						
3. State of Formation	4. Brief desc	Brief description of the character of business conducted in Rhode Island						
Rhode Island	Consulti	Consulting services and property management						
5. Principal office address 85 Hawthorne Avenue			City Warwick	State RI	Zip 02886			
6. MAILING ADDRESS (OF LIMITED LIABILIT	Y COMPANY AND N	AME OR TITLE OF CONTACT	PERSON:	一方的原理是不是在一家分别。			
Contact Name Jonathan S. Pratt			Contact Title Manager					
Street Address 85 Hawthorne Avenue			City Warwick	State RI	^{Zip} 02886			
7. LIST <u>ALL</u> MANAGER ("X" BOX FOR ATTAC		RESSES) OF THE LI	MITED LIABILITY COMPANY,	IF APPLICABLE - <u>DO</u>	NOT LIST MEMBERS			
Manager Name Jonathan S. Pratt			Manager Name					
Street Address 85 Hawthorne Ave	nue	***	Street Address					
City Warwick	State RI	Zip 02886	City	State	Zip			
Manager Name			Manager Name					
Street Address	eet Address			Street Address				
City	State	Zip	City	State	Zip			
8. RESIDENT AGENT IN	RHODE ISLAND	- L	Section of the sectio	Salar of the Appendix of	guerra ger Kessa av 199			
This information is curr	ently of record in the	e Office of the Secret	ary of State. Changes require	e filing Form 642.				

File Date FILED		Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements,		
Check No	SEP 3 0 2013	and that all statements contained berein are	frue and correct. 9 //5 / 2013	
By:	1366	Signature of Authorized Person	Date	
FOR SECRETARY OF STATE USE ONLY	-	Jonathan S. Pratt, Manager Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012