

## 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.

Entity ID No.	2 Evectine	me of the limited	liability company				
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484993			LANDSCAPINO				
3. State of Formation			aracter of business conducted in Rhod	and the second s			
VI.		t Land	scope work mul	chird/mou	sirg)		
5. Principal office address	UD TUR				ÖZS	92	
	F LIMITED LIABILI	TY COMPANY A	ND NAME OR TITLE OF CONTACT P	ERSON:	ibale seau Bal		
	K Dys	<u> </u>	Contact Title				
Street Address 485 SAND TURW Rd			d City W. King St	State P	27p 02892		
7. LIST ALL MANAGERS	(NAMES AND ADD	RESSES) OF T	HE LIMITED LIABILITY COMPANY, IF	APPLICABLE - DO N	OT LIST ME	MBERS A	
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Manager Name			Manager Name	Manager Name			
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Street Address			Street Address				
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8: RESIDENT AGENT IN R	With minding or property of the New York of the Angelone			Michigan C. Mercoloff Company	uni all peripe anche	szensikasána.	
Inis information is currer	ntly of record in the	Office of the S	ecretary of State. Changes require f	ling Form 642.			

FILED 11:34 MAR 0 4 2014 By 218968 VM

SHIPS: YES
Y
2012/2012
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Form No. 632 Revised: 01/2012 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.

Signature of Authorized Person

Date

DEREK DYER

Print or Type Name of Authorized Person