

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

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LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2014

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.

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1. Entity ID No. 827529	RAILSIDE		TAL SERVICES, LLC.			
3. State of Formation	4. Brief descr	iption of the characte	er of business conducted in Rhode Isla RUCTION AND DEMOLITION I	nd DEBRIS PRO	CESSING FACILITY	
RI			EMENT FACILITY			
5. Principal office addi 1 DEXTER ROA			City EAST PROVIDENCE	State RI	Zip 02914	
	S OF LIMITED LIABILITY	Y COMPANY AND N	AME OR TITLE OF CONTACT PERS	ON:		
Contact Name KENNETH J. FO	LEY		Contact Title MANAGER			
Street Address 1 DEXTER ROAD			City EAST PROVIDENCE	State RI	^{Zip} 02914	
7. LIST <u>ALL</u> MANAG ("X" BOX FOR ATT		RESSES) OF THE L	IMITED LIABILITY COMPANY, IF APP	LICABLE - <u>Do</u>	NOT LIST MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name	ſ		Manager Name	1		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
8. RESIDENT AGENT	-					
This information is c	urrently of record in the	Office of the Secre	tary of State. Changes require filing	Form 642.		
		OCT 1	0 2014			
File Date		D1	onder penalty of perjury, i		firm that I have examined schedules and statements,	

Print or Type Name of Authorized Person

9-26-14

Form No. 632 Revised: 01/2012

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