

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

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LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2015

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. 249822	SANDR	2 Exact name of the limited liability company SANDRA DEE, LLC				
3. State of Formation	4. Brief des To enga	Brief description of the character of business conducted in Rhode Island To engage in any business permitted LLC's under the Act.				
5. Principal office address 2457 POST ROAD			City WARWICK	State RI	Zip 02886	
Contact Name MICHAEL P. WINTER			Contact Title MEMBER			
Street Address 2457 POST ROAD			City WARWICK	State RI	Zip 02886	
Manager Name NONE			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
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This information is cur	rently of record in the	Office of the Seci	etary of State. Changes require	filing Form 642.		

FILED

SEP 21 2015

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements and that all statements gonfained never are are are correct.

Signature of Admorized Person

MICHAEL P. WINTER

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012