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 2040			
(401) 222-3040			
Limited Liability Com Annual Report Filing Period: September 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2015			
1. ID No. <u>000976290</u>			
2. Exact Name of the Limited Liability Company Radia Herbs, LLC			
3. State of Formation			
State: <u>RI</u>			
4. Brief Description of th <u>Retail</u>	e Character of the Business Which	is Actually Conduct	ed in Rhode Island
5. Principal Office Address			
	DOYLE AVENUE DVIDENCE State:	<u>RI</u> Zip: <u>02906</u>	Country: <u>USA</u>
6. Mailing Address of Li	nited Liability Company and Name	or Title of Contact F	Person:
Contact Name: <u>RACHEL PLAYE</u> Contact Title: <u>MEMBER</u>			
	DOYLE AVENUE <u>VIDENCE</u> State:	<u>RI</u> Zip: <u>02906</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	Adc	iress
	First, Middle, Last, Suffix	Address, City or Town,	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			
UNITED STATES CORPORATION AGENTS, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK, RI 02888			
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 October, 2015 at 3:19:56 PM 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>RACHEL PLAYE</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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