

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 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. 846835	2. Exact nat	me of the limited liabilit	y company			
3. State of Formation	4. Brief des	Brief description of the character of business conducted in Rhode Island				
RI						
5. Principal office address 29 Morton Ave		City Woonsocket	State RI	Zip 02895		
	and the state of t	the state of the s	A Comment of the Comm			
Contact Name Ernest J Nadeau		Contact Title Manager				
reet Address Scott Dr		City Lincoln	State RI	Zip 02865		
	(NAMES AND ADD MENT)	RESSER) OF THE LI	MITED LIABILITY COMPANY, IF	APPIXABLE - DO	NOT LIST MEMBER	
Manager Name Ernest J Nadeau		Manager Name				
			1			
			Street Address			
7 Scott Dr	State RI	Zip 02865	Street Address City	State	Zip	
7 Scott Dr City Lincoln				State	Zip	
7 Scott Dr City Lincoln Manager Name			City	State	Zip	
Street Address 7 Scott Dr City Lincoln Manager Name Street Address City			City Manager Name	State	Zip	
7 Scott Dr City Lincoln Manager Name Street Address	State	02865	City Manager Name Street Address			

OCT 2 6 2015

File Date	Under penalty of perjury, declare and affirm that I have examined this report/including any accompanying schedules and statements, and that all statements dontained herein are true and correct.		
Check No	/ // // //	10.2)	
Ву:	Signature of Authorized Person	Date	
FOR SECRETARY OF STATE USE ONLY	Ernest /Nadeau		
:	Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012