

## 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 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. <b>967715</b>		2. Exact name of the limited liability company SR Blackinton LLC				
301113						
3. State of Formation		Brief description of the character of business conducted in Rhode Island				
Rhode Island	wholesa	wholesale and retail sale of jewelry and other finished goods				
5. Principal office address 25 Maple Avenue			City Smithfield	State RI	Zip <b>02917</b>	
	LIMITED LIABILI	TY COMPANY AND	NAME OF TITLE OF CONTACT F	PERSON:	CAN SEPTEMBER	
Contact Name Susanne R. Juaire			Contact Title Member			
Street Address 25 Maple Avenue			City Smithfield	State RI	Zip <b>02917</b>	
7. LIST ALL MANAGERS ("X" BOX FOR ATTACH	NAMES AND ADD	ORESSES) OF THE	LIMITED LIABILITY COMPANY, II	FAPPLICABLE - DO	NOT LIST MEMBERS	
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	
8. RESIDENT AGENT IN R						
This information is curren	tly of record in th	e Office of the Secr	etary of State. Changes require	filing Form 642.		

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File Pate CY	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.		
Check No	Signature of Authorized Person Date		
FOR SECRETARY OF STATE USE ONLY	Susanne R. Juaire		
	Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012