

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. 558167	2. Exact name of the limited liability company LUCKY PAWS, LLC					
3. State of Formation	4. Brief des	Brief description of the character of business conducted in Rhode Island				
RI	PET SEF	PET SERVICES				
5. Principal office address 38 RHODE ISLAND AVENUE #3			City NEWPORT	State RI	Zip 02840	
6. MAILING ADDRESS OF	LIMITED LIABILI	TY COMPANY AND	NAME OR TITLE OF CONTACT F	PERSON:		
Contact Name DENISE DIGANGI			Contact Title			
Street Address 38 RHODE ISLAND AVENUE #3			City NEWPORT	State RI	Zip 02840	
7. LIST <u>ALL</u> MANAGERS (("X" BOX FOR ATTACH	(NAMES AND ADD	RESSES) OF THE	LIMITED LIABILITY COMPANY, I	F APPLICABLE - DO	NOT LIST MEMBERS	
Manager Name			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	HODE ISLAND					
This information is	the of record in the	Office of the Sec	retary of State. Changes require	filing Form 642		

FILED

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BY KL 109L

File Date	this report, including any accompanying schedules and statements and that all statements contained herein are true and correct.		
Check No	11/13/15		
Ву:	Signature of Authorized Person Date		
FOR SECRETARY OF STATE USE ONLY	DENISE DIGANGI		
FOR SECRETART OF STATE USE UNLI	Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012