



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. 000136349		2. Exact name of the limited liability company Dogs in Harmony, LLC	
3. State of Formation RI		4. Brief description of the character of business conducted in Rhode Island Production and marketing of dog treats and any other lawful purpose	
5. Principal office address 480 Saw Mill Road		City Glocester	State RI
		Zip 02857	
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:			
Contact Name Denise Holmes		Contact Title	
Street Address PO Box 136		City Harmony	State RI
		Zip 02829	
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>			
Manager Name Denise J. Holmes		Manager Name	
Street Address 480 Saw Mill Road		Street Address	
City Glocester	State RI	City	State
Zip 02857		Zip	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
8. RESIDENT AGENT IN RHODE ISLAND			
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.			

Dogs in Harmony closed for business on February 28, 2015

FILED

FEB 04 2016

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.

Denise J. Holmes
Signature of Authorized Person

02/02/2016

Date

Denise J. Holmes

Print or Type Name of Authorized Person

File Date

BY *Denise J. Holmes*

Check No.

By:

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