

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. 145370	2. Exact na	2. Exact name of the limited liability company					
		P	EARL ENTERPRISES, LLC				
3. State of Formation	4. Brief des	4. Brief description of the character of business conducted in Rhode Island					
Rhode Island	CONSUL	CONSULTING					
5. Principal office address 12 Mountaindale Road			City Smithfield	State RI	Zip 02917		
	MITED GIABILI	TY COMPANY AND	NAME ORTHUE OF CONTACTOR	ERSON ### ###			
Contact Name Mark A. Matteo			Contact Title Member				
Street Address 12 Mountaindale Road			City Smithfield	State RI	Zip 02917		
7 EIST/ <u>AUL</u> IMANAGERSI(NA ("X" BOXIFOR/ATTACHME	MES AND ADI	RESSES) OF THE	LIMITEDILIABILITY COMPANY IF	APPLICABLE - DOIN	OTTUST 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		
89RESIDENT/AGENT/IN/RHOL	All Same and the same						
inis information is currently of	of record in the	Office of the Secr	etary of State. Changes require fi	ling Form 642.	<u></u>		

FILED FEB 0 5 2016 BY 14 2364

File:Date	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		1. 17/1	
By:	Signature of Authorized Person	Date	
FOR SECRETARY OF STATE USE ONLY	Mark A. Matteo		
	Print or Type Name of Authorized Person		

Form No. 632 Revised: 01/2012