RI SOS Filing Number: 201695704190 Date: 04/08/2016 4:00 PM

State of Rhode Island and Providence Plantations
Department of State - Business Services Division
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
Filing Fee: $50.00 ***FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A $25.00 PENALTY FEE.**

1. Entity ID Number	2. Exact name of the Limited Liability Company
159197	POP'S PIZZA, LLC
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island
RHODE ISLAND	RESTAURANT

5. Principal Office Address	City	State	Zip
410 KINGSTOWN ROAD	CAROLINA	RI	028112

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name	Contact Title		
STEVEN M. GRANDOLFI	MEMBER		
Street Address: 6200 POST ROAD, LOT 33	City: NORTH KINGSTOWN	State: RI	Zip: 02852

7. List **ALL** managers (names and addresses) of the Limited Liability Company, IF 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

Check the box to indicate an attachment ☐

8. Resident Agent in Rhode Island This information is currently of record in the Department of State. Changes require filing Form 642.

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.

Name of Authorized Person	Date
STEVEN M. GRANDOLFI	
Signature of Authorized Person	4/6/16

FILED
APR 08 2016
BY 31357

Form No. 632
Revised: 2016

135079-4-1084068