



**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

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SECRETARY OF STATE  
CORPORATIONS DIV

2016 MAY 25 AM 11:05

**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 <u>765714</u>		2. Exact name of the Limited Liability Company <u>WALKERS Jewelers LLC</u>			
3. State of Formation <u>RI</u>		4. Brief description of the character of business conducted in Rhode Island <u>Retail Jewelry Store</u>			
5. Principal Office Address <u>PO Box 293</u>		City <u>Cumberland</u>	State <u>RI</u>	Zip <u>02864</u>	
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>Justin Kopka</u>		Contact Title <u>OWNER</u>			
Street Address <u>PO Box 293</u>		City <u>Cumberland</u>	State <u>RI</u>	Zip <u>02864</u>	
7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name <u>//</u>		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 <input type="checkbox"/>					
8. Resident Agent in Rhode Island This information is currently of record in the Department of State. Changes require filing Form 642.					
<b>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.</b>					
Name of Authorized Person <u>Justin Kopka</u>				Date <u>5/25/2016</u>	
Signature of Authorized Person <u>Justin Kopka</u>				SIGN DOCUMENT	

**FILED**

MAY 25 2016

By 275126  
AA