



**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: 2012

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			
481691		iCandyClothing LLC			
3. State of Formation		4. Brief description of the character of business conducted in Rhode Island			
RI		Internet Marketing			
5. Principal Office Address			City	State	Zip
11 South Angel st #378			Providence	RI	02906
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name			Contact Title		
Christopher Santos			owner		
Street Address		City	State	Zip	
PO BOX 611025		North Miami	FL	33261	
7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name		Manager Name		2016 JUN 21 AM 9:44	
Street Address		Street Address		SECRETARY OF STATE CORPORATIONS DIV	
City	State	Zip	City	State	
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	
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.					
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	
Christopher Santos				6/12/2016	
Signature of Authorized Person				SIGN DOCUMENT HERE	

FILED

JUN 21 2016

By 277114
A.A. 9:42 A.M.