



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2013

Limited Liability Company

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 000102443		2. Exact name of the Limited Liability Company ALADDIN TEMP-RITE LLC			
3. State of Formation TENNESSEE		4. Brief description of the character of business conducted in Rhode Island Sales of Commercial Food Service Equipment, Components and Supplies			
5. Principal Office Address 250 EAST MAIN STREET		City HENDERSONVILLE	State TN	Zip 37075	
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Lorrie Waggoner			Contact Title ACCOUNTING SUPERVISOR		
Street Address 250 EAST MAIN STREET		City HENDERSONVILLE	State TN	Zip 37045	
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 JEFF C. BURNS				Date 07/12/2016	
Signature of Authorized Person 					

FILED

JUL 18 2016 12:30

BY ce 279285

MAIL TO:

Division of Business Services
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