	sland and Providence Plantations of State - Business Services Division	
Junual Report for to Limited Liability Co. → Filing period: Septe → Filing Fee: \$50.00 → Penalty: Additional \$	ompany	
1. Entity ID Number 000395847	2. Exact name of the Limited Liability Company REBUILDEX OF PLYMOUTH COUNTY, LLC	
3. NAICS Code 23 - Construction	4. Brief description of the character of business conducted in Rhode Island	

General Construction 5. State of Formation **Massachusetts** 6. Principal Office Address City State Zip 6 Commerce Way Carver MA 02330 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Name West Light Development, Inc. Contact Title Manager Street Address 6 Commerce Way City Carver State MA ^{Zip} 02330 8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS Manager Name West Light Development, Inc. Manager Name Street Address 6 Commerce Way Street Address City Carver State MA Zip 02330 City State Zip Manager Name Manager Name Street Address Street Address City State Zip City State Zip Check the box to indicate an attachment 9. Resident Agent in Rhode Island. This information is currently of record with 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 Vittorio M. Artiano, President September 1, 2016 Signature of Authorized Person UMENT HERE

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

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