

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

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2018 CED - 9 FM 1: LO

1. Entity ID Number	lo E					
	2. Exact name of the Limited Liability Company					
150338	32 Sackett Street, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
5.3	Leal estate					
5. State of Formation						
R1						
6. Principal Office Address			City	State	Zip	
32 Unity Street			Womsocket	RI	02895	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Street Address 2 Unity Street City Wars Dall State Zip 0297						
Street Address 32 Unity Street			City Words Dall	State	Zip 02895	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name Manager Name						
treet Address			Street Address			
City	State a	Zin -	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
			Che	ck the box to ind	icate an attachment	
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 Janna Ball Coulbourn Date 9/9/16						
Signature of Authorized Person Tillu Dul						
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MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov SEP 0 9 2016

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