	State of Rhode Island and Providence Plantati Office of the Secretary of State	ONS Fee: \$50
	Division Of Business Services	
	148 W. River Street	
	Providence RI 02904-2615	
HOPE	(401) 222-3040	
imited Liabilit	ty Company	
nnual Report		
	ember 1 - November 1	
	R.I.G.L. 7-16-66(d), each limited liability company failing or refusing port within thirty (30) days after the time prescribed by law (R.I.G.L.	
	iect to a penalty fee of \$25.00.	/-
ANNUAL REPORT		
1. ID No. 001	1077788	
2. Exact Name o	of the Limited Liability Company <u>The Beehive Pantry LLC</u>	
3. State of Forma	ation	
State: RI		
	<b>ARTICLE III</b> g NAICS codes, please select the code that best describes your bu	siness.
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Using the following	g NAICS codes, please select the code that best describes your bu	<u>44-45</u>
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Using the following NAICS Code 4. Brief Description COFFEE SHOP/ 5. Principal Office No. and Street: City or Town: 6. Mailing Addres	g NAICS codes, please select the code that best describes your but for of the Character of the Business Which is Actually Conduct /BAKERY e Address 87 GOODING AVE BRISTOL State: RI Zip: 02809 ss of Limited Liability Company and Name or Title of Contact	ted in Rhode Island
Using the following NAICS Code 4. Brief Description COFFEE SHOP/ 5. Principal Office No. and Street: City or Town: 6. Mailing Address Contact Name:	g NAICS codes, please select the code that best describes your but for of the Character of the Business Which is Actually Conduct /BAKERY e Address 87 GOODING AVE BRISTOL State: RI Zip: 02809 ss of Limited Liability Company and Name or Title of Contact JENNIFER CAVALLARO Contact Title: OWNER	ted in Rhode Island
Using the following NAICS Code 4. Brief Description COFFEE SHOP/ 5. Principal Office No. and Street: City or Town: 6. Mailing Address Contact Name:	g NAICS codes, please select the code that best describes your but for of the Character of the Business Which is Actually Conduct /BAKERY e Address 87 GOODING AVE BRISTOL State: RI Zip: 02809 ss of Limited Liability Company and Name or Title of Contact	ted in Rhode Island
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Using the following NAICS Code 4. Brief Description COFFEE SHOP/ 5. Principal Office No. and Street: City or Town: 6. Mailing Address Contact Name: U No. and Street: City or Town: 7. Name and Add	g NAICS codes, please select the code that best describes your but for of the Character of the Business Which is Actually Conduct /BAKERY e Address 87 GOODING AVE BRISTOL State: RI Zip: 02809 ss of Limited Liability Company and Name or Title of Contact JENNIFER CAVALLARO Contact Title: OWNER 10 FRANKLIN STREET BRISTOL State: RI Zip: 02809 dress of Each Manager of the Limited Liability Company, if Appender Members	44-45   ted in Rhode Island   Country: USA   Person:   Country: USA

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

JENNIFER CAVALLARO <u>48 MULBERRY ROAD</u> <u>BRISTOL</u>, <u>RI</u> <u>02809</u>

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 14 Day of September, 2016 at 3:12:43 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

## By JENNIFER CAVALLARO

Signature of Authorized Person

Form No. 632 Revised 09/07

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