RI SOS Filing Number: 201608842030 Date: 09/14/2016 10:55 AM

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

Annual Report for the year: 2015
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	2. Exact name of the Limited Liability Company
000950830	16 Commercial Way, LLC
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island
RI	Wine & Spirits wholesale distribution

5. Principal Office Address	City	State	Zip
16 Commercial Way	Warren	RI	02885

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name	Contact Title
Scott Allen	General Manager

Street Address	City	State	Zip
20 Third Ave	Somerville	MA	02143

7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS

Manager Name	Street Address	City	State	Zip
The Allen C Trust	20 Third Ave	Somerville	MA	02143

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	Date
Scott Allen	8/30/16

Signature of Authorized Person

10:55 **FILED**
SEP 14 2016
BY 283470

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

FORM 632 - Revised: 05/2016

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