	State of Rhode Island and Providence Plantations Fee: \$5
	Office of the Secretary of State
	Division Of Business Services
	148 W. River Street
	Providence RI 02904-2615
HOPE	(401) 222-3040
imited Liability C	ompany
nnual Report	
iling Period: Septembe	er 1 - November 1
	G.L. 7-16-66(d), each limited liability company failing or refusing
	vithin thirty (30) days after the time prescribed by law (R.I.G.L. 7- o a penalty fee of \$25.00.
ANNUAL REPORT YE	AR: <u>2016</u>
1. ID No. <u>000812</u>	289
2. Exact Name of the	e Limited Liability Company Oxford Holdings, LLC.
3. State of Formatio	n
State: <u>RI</u>	
	ARTICLE III
Using the following NA	ARTICLE III ICS codes, please select the code that best describes your business.
	ICS codes, please select the code that best describes your business.
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NAICS Code   4. Brief Description of   SELLING, BUYING   5. Principal Office Ad   No. and Street:   City or Town:   E   6. Mailing Address of   Contact Name:   CHR   No. and Street:   3.   City or Town:   E	ICS codes, please select the code that best describes your business.   Image: State of the Business Which is Actually Conducted in Rhode Island   Image: State of the Business Which is Actually Conducted in Rhode Island   Image: State of the Business Which is Actually Conducted in Rhode Island   Image: State of the Business Which is Actually Conducted in Rhode Island   Image: State of the Business Which is Actually Conducted in Rhode Island   Image: State of the Business Which is Actually Conducted in Rhode Island   Image: State of the Business Which is Actually Conducted in Rhode Island   Image: State of the Business Which is Actually Conducted in Rhode Island   Image: State of State of State of Contact Person:   ISTOPHER J. FRAGOMENI Contact Title:   ISTOPHER J. FRAGOMENI Contact Title:   Image: State of The State of State of Contact Person:   ISTOPHER J. FRAGOMENI Contact Title:   Image: State of The State of The State of Country: USA   Image: State of The State of The State of Contact Person, if Applicable.
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Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

JONATHAN SAVAGE, ESQ. 1080 MAIN STREET PAWTUCKET, RI 02860

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

**Signed this 21 Day of September, 2016 at 2:34:26 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 <u>CHRISTOPHER J. FRAGOMENI</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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