State of Rhode Island and Providence Plantations Department of State - Business Services Division	
Annual Report for the year: 2016 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							
803786			nited Liability Company				
		SIMPLY R.I., LLC					
3. NAICS Code	4. Brief dr	escription of the	character of business conducted	d in Rhode Island			
44-45 - Retail Trade		Wholesale and retail sale of State of Rhode Island and other products					
5. State of Formation	\neg			- Care			
Rhode Island							
6. Principal Office Address			City	State	T		
159 Elmgrove Avenue			Providence	RI	Zip 02906		
7. Mailing Address of Limited	d Liability Comp	any and Name c	or Title of Contact Person				
Contact Name Dorothy D. Ma	lartiesian		Contact Title				
Street Address 159 Elmgrove Avenue		City Providence	State RI	^{Zip} 02906			
8. List ALL managers (name	es and addresse	s) of the Limited	d Liability Company, IF APPLICAE	BI E - DO NOT LIST	MEMBERS		
- Con	vas al	AMPL	Manager Name				
Street Address) V 1	Street Address	Street Address			
City	State	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address	Street Address			
City	State	Zip	City				
<u></u>		- ih	City	State	Zip		
				Check the box to it	ndicate an attachment		
). Resident Agent in Knode is	sland. This inform	nation is currently c	of record with the Department of State	to Changes service Eli-			
statements, and that all stat	geciare and affil	irm that i have e	avaminad this conserve in the level	any accompanying	g schedules and		
Name of Authorized Person			New Print Columbia	Date _			
Dorothy D. Martiesian					5,2016		
Signature of Authorized Perso		TISIGNE	DOCUMENT HERE		1100014		
	L VIAMALO	A VALLEY.	<u> </u>		_		

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED SEP 21 2015 3849 OS