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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	2 Evact pan	ne of the Limited Lis	ability Company				
1018681	2. Exact name of the Limited Liability Company						
1018681	Restaurant Helpers, LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
81 - Other Services (except Pub	Restaurant equipment sales & services						
5. State of Formation							
Rhode Island							
6. Principal Office Address			City	State	Zip		
79 Pembroke Lane			Coventry	RI	02816		
7. Mailing Address of Limited Lia	bility Compan	y and Name or Title	of Contact Person				
Contact Name Eric Castro			Contact Title Member				
Street Address 79 Pembroke Lan	79 Pembroke Lane			State RI	^{Zip} 02816		
8. List ALL managers (names an	d addresses)	of the Limited Liabi	lity Company, IF APPLICA	ABLE - DO NOT LIST M	EMBERS		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
		•		Check the box to in	dicate 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				Date (a	1./11		
Eric Castro /O/// &							
Signature of Authorized Person SIGN DOCUMENT HERE							

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 ov

OCT 0 5 2016