State of Rhode Is Department			vices Division	-		
Annual Report for t	he vear: 201	6				
Limited Liability Co → Filing period: Septer → Filing Fee: \$50.00 → Penalty: Additional \$	mpany mber 1 - Novem		December 1.	_		
1. Entity ID Number	2. Exact na	2. Exact name of the Limited Liability Company				
155172		FERREIRA LANDSCAPING, LLC				
3. NAICS Code 5. State of Formation RHODE ISLAND		Brief description of the character of business conducted in Rhode Island LANDSCAPING SERVICES				
6. Principal Office Address			City	State	Zip	
106 BLISS ROAD			NEWPORT	RI	02840	
7. Mailing Address of Limite	ed Liability Compa	ny and Name o	r Title of Contact Person	<u>, , , , , , , , , , , , , , , , , , , </u>		
Contact Name TIMOTHY J. FERREIRA			Contact Title MEMBER			
Street Address 18 FOWLER AVENUE			City NEWPORT	State RI	^{Zip} 02840	
8. List ALL managers (nam	nes and addresses	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name	Manager Name →		
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		

9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.

Zip

FERREIRA

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

State

10/1/16

Check the box to indicate an attachment[

Signature of Authorized Person

SIGN DOCUMENT HERE

City

MAIL TO:

City

Division of Business Services

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

State

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED OCT 0 5 2016

BY 24200S