



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

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2016 OCT 17 AM 11:39

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 96544		2. Exact name of the Limited Liability Company SUMMER SALES, L.L.C.			
3. NAICS Code 44-45 - Retail Trade		4. Brief description of the character of business conducted in Rhode Island BUYING AND SELLING OF VARIOUS PRODUCTS			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 62 Summer Street - P.O. Box 559			City WESTERLY	State RI	Zip 02891
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name JOYCE SMITH BABBIN			Contact Title		
Street Address 62 SUMMER STREET - P.O. BOX 559			City WESTERLY	State RI	Zip 02891
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name JOYCE SMITH BAB BIN			Manager Name		
Street Address 62 SUMMER STREET - P.O. BOX 559			Street Address		
City WESTERLY	State RI	Zip 02891	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
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 JOYCE SMITH BABBIN				Date 10/3/16	
Signature of Authorized Person <i>Joyce Smith Babbie</i>			SIGN DOCUMENT HERE		

FILED *e*

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