	State of Rhode Island and Pro Office of the Secreta		Fee: \$50
HOPE	Division Of Business 148 W. River St Providence RI 0290 (401) 222-304	reet 14-2615	
imited Liability	Company		
nnual Report	her 1 - Novemher 1		
n accordance with R. o file its annual report	I.G.L. 7-16-66(d), each limited liability comp t within thirty (30) days after the time presci t to a penalty fee of \$25.00.		
ANNUAL REPORT Y	EAR: <u>2016</u>		
1. ID No. <u>00079</u>	91926		
2. Exact Name of t	he Limited Liability Company H.S. Ren	nodeling LLC	
3. State of Formati	on		
State: <u>RI</u>			
	ARTICLE III		
Usina the followina N	IAICS codes, please select the code that b	est describes vour business.	
NAICS Code			
NAICS Code		<u>    6    2</u> .	3
A Priof Decorintion	of the Character of the Business Which	is Actually Conducted in	Rhode Island
4. Bhei Description			
	ATHROOM REMODELING THING	AND HOUSE REPAIRS	
KITCHEN AND B	ATHROOM REMODELING, TILING	AND HOUSE REPAIRS.	
KITCHEN AND B	Address	AND HOUSE REPAIRS.	
<u>KITCHEN AND B</u> 5. Principal Office A No. and Street: <u>7</u>	Address REMINGTON FARM DRIVE		Country: <u>USA</u>
KITCHEN AND B.         5. Principal Office A         No. and Street: <u>7</u> City or Town: <u>C</u>	Address REMINGTON FARM DRIVE COVENTRY	State: <u>RI</u> Zip: <u>02816</u> C	
KITCHEN AND B.         5. Principal Office A         No. and Street:       7         City or Town:       C         6. Mailing Address	Address <u>REMINGTON FARM DRIVE</u> <u>COVENTRY</u> of Limited Liability Company and Name	State: <u>RI</u> Zip: <u>02816</u> ( or Title of Contact Persor	
KITCHEN AND B.         5. Principal Office A         No. and Street:       7         City or Town:       C         6. Mailing Address         Contact Name:       STI         No. and Street:       7	Address          REMINGTON FARM DRIVE         COVENTRY         of Limited Liability Company and Name         EPHAN HAUBRICH         CONTRY         COVENTRY	State: <u>RI</u> Zip: <u>02816</u> C or Title of Contact Persor R/OPERATOR	יייייייייייייייייייייייייייייייייייייי
KITCHEN AND B.         5. Principal Office A         No. and Street:       7         City or Town:       C         6. Mailing Address         Contact Name:       STI         No. and Street:       7	Address          REMINGTON FARM DRIVE         COVENTRY         of Limited Liability Company and Name         EPHAN HAUBRICH         CONTRY         COVENTRY	State: <u>RI</u> Zip: <u>02816</u> C or Title of Contact Persor R/OPERATOR	
KITCHEN AND B.         5. Principal Office A         No. and Street: 7         City or Town: 2         6. Mailing Address         Contact Name: STI         No. and Street: 7         City or Town: 2	Address          REMINGTON FARM DRIVE         COVENTRY         of Limited Liability Company and Name         EPHAN HAUBRICH         COVENTRY         COVENTRY         Sof Limited Liability Company and Name         EPHAN HAUBRICH         COVENTRY         SOVENTRY         Sof Each Manager of the Limited Liab	State: <u>RI</u> Zip: <u>02816</u> C or Title of Contact Person <u>R/OPERATOR</u> State: <u>RI</u> Zip: <u>02816</u>	n: Country: <u>US</u>
KITCHEN AND B.         5. Principal Office A         No. and Street:       7         City or Town:       C         6. Mailing Address         Contact Name:       STI         No. and Street:       7         City or Town:       C         Contact Name:       STI         No. and Street:       7         City or Town:       C         7. Name and Addres	Address          REMINGTON FARM DRIVE         COVENTRY         of Limited Liability Company and Name         EPHAN HAUBRICH         COVENTRY         COVENTRY         Sof Limited Liability Company and Name         EPHAN HAUBRICH         COVENTRY         SOVENTRY         Sof Each Manager of the Limited Liab	State: <u>RI</u> Zip: <u>02816</u> C or Title of Contact Person <u>R/OPERATOR</u> State: <u>RI</u> Zip: <u>02816</u>	n: Country: <u>US</u>

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

STEPHAN HAUBRICH 7 REMINGTON FARM DRIVE COVENTRY, RI 02816

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

**Signed this 25 Day of October, 2016 at 7:44:40 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>STEPHAN HAUBRICH</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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