(FR)	

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. Exact name of the Limited Liability Company								
1335250	Narragansett Flags, LLC								
3. NAICS Code	Brief description of the character of business conducted in Rhode Island								
81 - Other Services (except Pub	Selling flags and selling and installing flag poles for residential and commercial purposes.								
5. State of Formation									
Rhode island									
6. Principal Office Address		City State Zip							
404 Prospect Street			Seekonk MA 02771						
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person									
Contact Name Arthur J. DeBlois,	III	Contact Title Authorized Person							
Street Address 404 Prospect Stre	pect Street City Seekonk State MA Zip 02771			<sup>Zip</sup> 02771					
8. List ALL managers (names ar	nd addresses) o	f the Limited Liabi	lity Company, IF APPLICABLE -	DO NOT LIST M	EMBERS				
Manager Name N/A									
Street Address		· · · · · ·	Street Address						
City	State	Zip	City	State	Zip				
Manager Name		<u>-</u>	Manager Name						
Street Address			Street Address						
City	State	Zip	City	State	Zip				
		<u> </u>	CI	neck the box to in	dicate an attachment				
9. Resident Agent in Rhode Islar	d. This information	on is currently of rec	ord with the Department of State. Ch	nanges 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									
Arthur J. DeBlois, III									
Signature of Authorized Person									

MAIL TO:

Division of Business Services

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

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