Non C

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: **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 Event nume		Lillia Company			
	2. Exact name of the Limited Liability Company					
1268044	Casa Bella Designs, LLC					
3 NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
81 Other Services (except Pub	hair salon					
5. State of Formation						
RI						
6. Principal Office Address			City	State	Zip	
1625 Old Louisquisset Pike			Lincoln	RJ	02866	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name JoAnn M. Gludici			Contact Title Member			
Street Address 1525 Old Louisquisset Pike			City Lincoln	State RI	Zip 02865	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Marie			Manager Name			
Street address			Street Address			
Cily	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address ,			
City	State	Zip	City	State	Zlp	
Check the box to indicate 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	Date	
JoAnn M. Gludici, Member				10/20/14		
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**

OCT 27 2016

FORM 632 - Revised: 08/2016