

-> Penalty: Additional \$25.00	fee if form is	not filed by Dece	mber 1.			
1. Entity ID Number 1339194	Exact name of the Limited Liability Company     Blue Horseshoe, LLC					
3. NAICS Code Investments (	4. Brief description of the character of business conducted in Rhode Island Investments					
6. Principal Office Address			City	State	Zip	
114 Aaron Avenue			Bristol	RI	02809	
7. Mailing Address of Limited Lia	bility Compan	y and Name or Titl	e of Contact Person			
Contact Name Richard M. Kulbieda			Contact Title Manager			
Street Address 114 Aaron Avenue			<sup>City</sup> Bristol	State RI	Zip <b>02809</b>	
8. List ALL managers (names ar	nd addresses)	of the Limited Liab	oility Company, IF APPLICA	ABLE - DO NOT LIST M	EMBERS	
Manager Name Richard M. Kulbieda			Manager Name			
Street Address 114 Aaron Avenue			Street Address			
<sup>City</sup> Bristol	State RI	Zip 02809	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. Resident Agent in Rhode Islan						
Under penalty of perjury, I dec statements, and that all statem	lare and affir ents contain	m that I have exar ed herein are true	mined this report, includi a and correct.	ng any accompanying	schedules and	
Name of Authorized Person				Date	Date	
Richard M. Kulbieda				10-27	16	
Signature of Authorized Person	//	SIGN DO	CUMENT 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

