	State of Rhode Island and Providence Plantations Fee: \$50 Office of the Secretary of State
	Division Of Business Services
	148 W. River Street
	Providence RI 02904-2615
HOPE	(401) 222-3040
imited Liability Co	ompany
nnual Report	
ling Period: Septembe	r 1 - November 1
	G.L. 7-16-66(d), each limited liability company failing or refusing
	vithin thirty (30) days after the time prescribed by law (R.I.G.L. 7- a penalty fee of \$25.00.
ANNUAL REPORT YE	AR: <u>2016</u>
. ID No. <u>000789</u>	080
. Exact Name of the	E Limited Liability Company <u>BLT, LLC</u>
3. State of Formation	
State: RI	
Using the following NA	ICS codes, please select the code that best describes your business.
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Using the following NA	
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NAICS Code	ICS codes, please select the code that best describes your business. $6 \frac{72}{5}$
NAICS Code	ICS codes, please select the code that best describes your business. $6 \frac{72}{5}$
NAICS Code 4. Brief Description o RESTAURANT	ICS codes, please select the code that best describes your business.
NAICS Code	ICS codes, please select the code that best describes your business.
NAICS Code 4. Brief Description o <u>RESTAURANT</u> 5. Principal Office Ad	ICS codes, please select the code that best describes your business.
NAICS Code 4. Brief Description o RESTAURANT 5. Principal Office Ad No. and Street: 5	ICS codes, please select the code that best describes your business.
NAICS Code 4. Brief Description o RESTAURANT 5. Principal Office Ad No. and Street: 5 City or Town: <u>N</u>	ICS codes, please select the code that best describes your business.          6       72         f the Character of the Business Which is Actually Conducted in Rhode Island         dress         STONE RIDGE DRIVE         ORTH SMITHFIELD       State: RI       Zip: 02896       Country: USA
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Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

JOHN O. MANCINI, ESQ. 128 DORRANCE STREET, SUITE 300 PROVIDENCE, RI 02903

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

**Signed this 9 Day of November, 2016 at 11:37:56 AM 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 JOHN O. MANCINI Signature of Authorized Person

Form No. 632 Revised 09/07

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