

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

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

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LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2016

Filing Period: September 1 - November 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No.		2. Exact name of the limited liability company Charrel's Eclectcity, LLC								
145433	Charters	s Luiculuity, LLO	r of business conducted in Rhode Island							
3. State of Formation										
Rhode Island	Retail sa	les of home wall	decor, leather goods and related items							
5. Principal office address 63 Dundas Avenue	9		City Warwick	Zip 02889						
6 MAILING ADDRESS	E MITTED LIABILE	Y COMPANY AND A	ME OF TITLE DECONTACT	PERSON:						
Contact Name Edean C. Mendons	sa		Contact Title							
Street Address 63 Dundas Avenue	•		City Warwick							
7. LIST ALL MANAGERS ("X" BOX FOR ATTAC		RESSES) OF THE LI	MITED LIABILITY COMPANY,	IF APPLICABLE - DO	NOT LISTEMEMBERS					
Manager Name Edean C. Mendons	sa .		Manager Name Street Address							
Street Address 63 Dundas Avenue)	14-44								
City Warwick	State RI	Zip 02889	City	State	Zip					
Manager Name		1	Manager Name							
Street Address	v .	<u></u>	Street Address							
City	State	Zip	City	State	Zip					
8. RESIDENT AGENT IN	RHODE ISLAND		Monthly Congress of the Congre	and Province Calculate to the province of the control of the contr						
This information is curre	ently of record in th	e Office of the Secret	tary of State. Changes requir	e filing Form 642.						

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Form No. 632 Revised: 01/2012 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

Signature of Authorized Person

Edean C. Mendonsa, Member

Print or Type Name of Authorized Person