

Annual Report for the year: 2015 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.

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R.I. DEPT. OF STATE
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1. Entity ID Number	2. Exact na	2. Exact name of the Limited Liability Company				
959389	FARAU)	FARAONE STONEWORK & MASONRY SERVICES LLC				
3. NAICS Code	4. Brief des	4. Brief description of the character of business conducted in Rhode Island				
23	Maso:	Masonry Contractor Build Walls, walks, putios.				
5. State of Formation	BREEK, Block and Stone work, MOSTY KISIDENING					
RI	Masonry Contractor Build WAIRS, WAIRS, FEET 105: BREECH, Block and Stone work, Mostly Residential Projects, for contractors and Homeowners					
6. Principal Office Address 100 Gold Finch Dr. #135			Creentry	State	2ip 02816	
100 GDIFFINER DE 133			Coloring	RI	00015	
7. Mailing Address of Limited L	iability Compa	ny and Name o	r Title of Contact Person			
Contact Name ROBERT FARADNE			Contact Title	Contact Title OWNER		
Street Address 100 Go/DFineHDC #135			Country		Zip 02816	
8. List ALL managers (names	and addresses	s) of the Limited	Liability Company, IF APPLIC	ABLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
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 de statements, and that all state				ding any accompanyir	ng schedules and	
Name of Authorized Person			Date			
ROBERT 1	FARA	ONE		11-10	0-2-0/6	
Signature of Authorized Person						
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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**

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BY 288195

WFORM 632 - Revised: 08/2016