	State of Rhode Island and Providence Plantations Fee: \$5 Office of the Secretary of State
	Division Of Business Services
	148 W. River Street
	Providence RI 02904-2615
HOPE	(401) 222-3040
imited Liability C	ompany
nnual Report	
iling Period: Septembo	
	G.L. 7-16-66(d), each limited liability company failing or refusing within thirty (30) days after the time prescribed by law (R.I.G.L. 7-
	o a penalty fee of \$25.00.
ANNUAL REPORT YE	<b>AR</b> : <u>2016</u>
I. ID No. <u>000505</u>	5792
2. Exact Name of the	e Limited Liability Company <u>WE LLC</u>
3. State of Formatio	n
State: RI	
Using the following NA	
	AICS codes, please select the code that best describes your business.
Using the following NA	
NAICS Code	AICS codes, please select the code that best describes your business.
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NAICS Code 4. Brief Description of	AICS codes, please select the code that best describes your business. $6  44-45$
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NAICS Code         4. Brief Description of         GAS STATION         5. Principal Office Act         No. and Street:       2         City or Town:       Y         6. Mailing Address of         Contact Name:       WIS	AICS codes, please select the code that best describes your business.
NAICS Code         4. Brief Description of         GAS STATION         5. Principal Office Action         No. and Street:       2         City or Town:       Y         6. Mailing Address of         Contact Name:       WIS         No. and Street:       2'	AICS codes, please select the code that best describes your business. 44-45  of the Character of the Business Which is Actually Conducted in Rhode Island  ddress <u>11 BELLMAN AVENUE</u> VARWICK State: <u>RI</u> Zip: <u>02889</u> Country: <u>USA</u> f Limited Liability Company and Name or Title of Contact Person: <u>SAM FARHAT</u> Contact Title: <u>MEMBER</u>
NAICS Code         4. Brief Description of         GAS STATION         5. Principal Office Act         No. and Street:       2         City or Town:       Y         6. Mailing Address of         Contact Name:       WIS         No. and Street:       2'         City or Town:       Y	AICS codes, please select the code that best describes your business. <u>44-45</u> of the Character of the Business Which is Actually Conducted in Rhode Island Idress <u>11 BELLMAN AVENUE</u> VARWICK State: <u>RI</u> Zip: <u>02889</u> Country: <u>USA</u> f Limited Liability Company and Name or Title of Contact Person: <u>SAM FARHAT</u> Contact Title: <u>MEMBER</u> <u>11 BELLMAN AVENUE</u> <u>VARWICK</u> State: <u>RI</u> Zip: <u>02889</u> Country: <u>USA</u> s of Each Manager of the Limited Liability Company, if Applicable.
NAICS Code         4. Brief Description of         GAS STATION         5. Principal Office Action         No. and Street:       2         City or Town:       Y         6. Mailing Address of         Contact Name:       WIS         No. and Street:       2         City or Town:       Y         Address       Y         Address       Y         Y       Y         Address       Y         Y       Y         No. and Street:       Y         Y       Y         Y       Y         Y       Y         Y       Y         Y       Y         Y       Y         Y       Y         Y       Y         Y       Y         Y       Y         Y       Y         Y       Y         Y       Y         Y       Y<	AICS codes, please select the code that best describes your business. <u>44-45</u> of the Character of the Business Which is Actually Conducted in Rhode Island Idress <u>11 BELLMAN AVENUE</u> VARWICK State: <u>RI</u> Zip: <u>02889</u> Country: <u>USA</u> f Limited Liability Company and Name or Title of Contact Person: <u>SAM FARHAT</u> Contact Title: <u>MEMBER</u> <u>11 BELLMAN AVENUE</u> <u>VARWICK</u> State: <u>RI</u> Zip: <u>02889</u> Country: <u>USA</u> s of Each Manager of the Limited Liability Company, if Applicable.

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

WISSAM FARHAT 211 BELLMAN AVENUE WARWICK , RI 02889

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

## Signed this 15 Day of November, 2016 at 11:21:04 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 <u>NANCY A HAIGHT</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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