



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2016
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.

1. Entity ID Number 585333		2. Exact name of the Limited Liability Company COD BELLY, LLC			
3. NAICS Code 53		4. Brief description of the character of business conducted in Rhode Island HOLD REAL ESTATE			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 2426E Commodore Perry Hwy 3464		City Wakefield		State RI	Zip 02879
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Kimberly Hooper			Contact Title Member		
Street Address 2426E Commodore Perry Hwy 3464		City Wakefield		State RI	Zip 02879
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
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 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.					
Name of Authorized Person Kimberly Hooper				Date 11/15/16	
Signature of Authorized Person Kimberly Hooper					

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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