	or orace - Du	Silless Serv	rices Division	6	R. R	
Annual Report for th Limited Liability Cor	mpany			(3 PAG	
→ Filing period: Septen → Filing Fee: \$50.00					PH STA	
→ Penalty: Additional \$2	25.00 fee if form	is not filed by D	ecember 1.	·	2: 	
1. Entity ID Number	2. Exact na	2. Exact name of the Limited Liability Company				
795366	At	A to Z INTERNATIONAL, LLC				
3. NAICS Code		4. Brief description of the character of business conducted in Rhode Island				
81	E×	cporting	g materials an	d good	s from the	
5. State of Formation		aitad S	- tates to foreig	n cour	trios	
Rhode Island	O.	iiteu 3	tates to lorely	iii Couii	ll IC3	
6. Principal Office Address			City	State	Zip	
35 Rosemary Street			Cranston	RI	02920	
7. Mailing Address of Limite	d Liability Compa	any and Name o				
Contact Name	d Liability Compa	any and Name or	Contact Title			
Contact Name Wei Hui Wu Street Address		any and Name or	Contact Title Member City	State	Zin2920	
Contact Name Wei Hui Wu Street Address 35 Rosemary	Street		Contact Title Member City Cranston	State RI	Zip. 02920 MEMBERS	
Contact Name Wei Hui Wu Street Address 35 Rosemary	Street es and addresses		Contact Title Member City Cranston Liability Company, IF APPLICABLE Manager Name	E - DO NOT LIST	Zip 02920 MEMBERS	
Contact Name Wei Hui Wu Street Address 35 Rosemary 8. List ALL managers (name	Street es and addresses		Contact Title Member City Cranston Liability Company, IF APPLICABLE	E - DO NOT LIST	Zip 2920 MEMBERS	
Contact Name Wei Hui Wu Street Address 35 Rosemary 8. List ALL managers (name Manager Name N/A	Street es and addresses		Contact Title Member City Cranston Liability Company, IF APPLICABLE Manager Name N/A	E - DO NOT LIST	Zip. 2920 MEMBERS	
Contact Name Wei Hui Wu Street Address 35 Rosemary 8. List ALL managers (name Manager Name N/A Street Address City	Street es and addresses	s) of the Limited	Contact Title Member City Cranston Liability Company, IF APPLICABLE Manager Name N/A Street Address	State	MEMBERS	
Contact Name Wei Hui Wu Street Address 35 Rosemary 8. List ALL managers (name Manager Name N/A Street Address City Manager Name N/A	Street es and addresses	s) of the Limited	Contact Title Member City Cranston Liability Company, IF APPLICABLI Manager Name N/A Street Address City Manager Name	State	MEMBERS	
Contact Name Wei Hui Wu Street Address 35 Rosemary 8. List ALL managers (name Manager Name N/A Street Address City Manager Name N/A Street Address	Street es and addresses	s) of the Limited	Contact Title Member City Cranston Liability Company, IF APPLICABLE Manager Name N/A Street Address City Manager Name	State	MEMBERS	
Contact Name Wei Hui Wu Street Address 35 Rosemary 8. List ALL managers (name Manager Name N/A Street Address City Manager Name N/A Street Address City	Street es and addresses State	s) of the Limited Zip	Contact Title Member City Cranston Liability Company, IF APPLICABLE Manager Name N/A Street Address City Manager Name N/A Street Address City City Cranston N/A	State State Check the box to	Zip Zip indicate an attachment	

Weithin WWHIM HE THERE

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 **Phone:** (401) 222-3040

State of Rhode Island and Providence Plantations

Website: www.sos.ri.gov

Name of Authorized Person

Wei Hui Wu

Signature of Authorized Person

FILED

Date

1/29/16

NOV 3 0 2016

By 8047

FORM 632 - Revised: 08/2016