State of Rhode Island and Providence Plantations Fee: \$50.00 Office of the Secretary of State Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040 Limited Liability Company Annual Report Filing Period: September 1 - November 1 In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file. Support OF September 1 - November 1 In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file. Support OF September 1 - November 1 In accordance with R.I.G.L. 7-16-66(d), log days after the time prescribed by law (R.I.G.L. 7- Action (TeAGLE) ANNUAL REPORT YEAR: 2016 1. ID No. 000334608 2. Exact Name of the Limited Liability Company Good to Grow, LLC 3. State of Formation State: RI State: RI Attract Mathematical Ma					
I48 W. River Street Providence RI 02904-2615 (401) 222-3040 Limited Liability Company Annual Report Filing Period: September 1 - November 1 In accordance with RIGL 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (20) days after the time prescribed by law (R.I.G.L. 7- 16-66(b&c)) is subject to a penalty fee of \$25.00. ANNUAL REPORT YEAR: 2016 1. ID No. 000334608 2. Exact Name of the Limited Liability Company Good to Grow, LLC 3. State of Formation State: RI ARTICLE III Using the following NAICS codes, please select the code that best describes your business. NAICS Code 44-45 Attract of the Business Which is Actually Conducted in Rhode Island INDOOR/OUTDOOR GARDENING SUPPLIES State: XI zip: 02817 Country: USA Contact Title: No. and Street: 34 NOOSENECK HILL ROAD, UNIT 4 City or Town: WEST GREENWICH State: XI zip: 02817 Country: USA 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person: Contact Title: No. and Street: 34 NOOSENECK HILL ROAD, UNIT 4 City or Town: WEST GREENWICH State: XI zip: 02817 Country: USA 6. Mailing Address				Fee: \$50.00	
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First, Middle, Last, Suffix Address, City or Town, State, Zip Code, Country	Title	Individual Name	Address		
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	8. RESIDENT AGENT IN	RHODE ISLAND - DO NOT ALTER			

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

SUSAN LEACH DEBLASIO, ESQ. ADLER POLLOCK & SHEEHAN P.C. ONE CITIZENS PLAZA, 8TH FLOOR PROVIDENCE, RI 02903

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

Signed this 27 Day of January, 2017 at 1:57:13 PM 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 JUSTIN BLAIR

Signature of Authorized Person

Form No. 632 Revised 09/07

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