	State of Rhode Island and Providence Plantations Office of the Secretary of State	Fee: \$50.
	Division Of Business Services	
	148 W. River Street	
	Providence RI 02904-2615 (401) 222-3040	
HOPE		
imited Liability Con Annual Report	npany	
Filing Period: September 1	1 - November 1	
n accordance with R.I.G.L	7-16-66(d), each limited liability company failing or refusing	
	nin thirty (30) days after the time prescribed by law (R.I.G.L. 7-	
6-66(b&c)) is subject to a	penalty fee of \$25.00.	
ANNUAL REPORT YEAR	: 2016	
1. ID No. <u>00016174</u>	<u>19</u>	
2. Exact Name of the L	imited Liability Company Colorscapes, LLC	
3. State of Formation		
State: <u>RI</u>		
	ARTICLE III	
Using the following NAIC	S codes, please select the code that best describes your business	
Using the following NAICS	S codes, please select the code that best describes your business	
NAICS Code	<u>6</u> <u>2</u>	3
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Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

KEITH A. BECK 30 STANLEY STREET NORTH PROVIDENCE, RI 02904

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

Signed this 13 Day of February, 2017 at 1:14:18 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 <u>KEITH A BECK</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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