



State of Rhode Island and Providence Plantations

**Department of State - Business Services Division**

**Annual Report for the year:** 2017  
**Corporation**

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 73873		2. Exact name of the Corporation WINKLER GROUP, LTD.			
3. Principal Office Address 54 Taylor Drive		City East Providence		State RI	Zip 02916
4. NAICS Code 42	6. Brief description of the character of business conducted in Rhode Island  dealing in jewelry and accessories of every type				
5. State of Incorporation RI					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name Traci Winkler Maceroni			Vice-President Name Heidi Winkler Loomis		
Street Address 141 Freeman Parkway			Street Address 16 Freeman Parkway		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
Secretary Name Heidi Winkler Loomis			Treasurer Name Traci Winkler Maceroni		
Street Address 16 Freeman Parkway			Street Address 141 Freeman Parkway		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name Heidi Winkler Loomis			Director Name Traci Winkler Maceroni		
Street Address 16 Freeman Parkway			Street Address 141 Freeman Parkway		
City Providence	State RI	Zip 02906	City Providence	State RI	Zip 02906
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. Shares Authorized <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
This information is currently of record in the Department of State.  Changes require an additional filing.			10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>		
			NUMBER OF SHARES 700	CLASS/SERIES common	PAR VALUE \$1.00
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee. <i>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.</i>					
Name of Authorized Representative  Heidi Winkler Loomis			Date FILED 10/17		
Signature of Authorized Representative  <i>[Signature]</i>			SIGN DOCUMENT HERE  FEB 13 2017		

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

BY

*[Signature]*

FORM 630 - Revised: 10/2016

**WINKLER GROUP, LTD.**

Unanimous Consent of Directors


IO  
735873

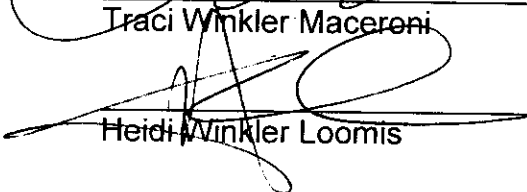
The undersigned, being all of the Directors of WINKLER GROUP, LTD., a Rhode Island corporation (the "Corporation") hereby consent, pursuant to the provisions of §7-1.1-39.1 of the General Laws of Rhode Island, 1956, as amended, to the taking of the following action for and on behalf of the Corporation:

VOTED: That the following persons be elected officers of the Corporation, to serve until the next annual meeting or until their respective successors are duly elected and qualified:

President:	Traci Winkler Maceroni
Vice President:	Heidi Winkler Loomis
Treasurer:	Traci Winkler Maceroni
Secretary:	Heidi Winkler Loomis

IN WITNESS WHEREOF, the undersigned have executed this Consent as of the 10<sup>th</sup> day of February, 2017.

  
\_\_\_\_\_  
Traci Winkler Maceroni

  
\_\_\_\_\_  
Heidi Winkler Loomis

**FILED**

**FEB 13 2017**

BY 012211  
