



State of Rhode Island and Providence Plantations
Office of the Secretary of State

No Fee

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Domestic Limited Liability Company
Annual Report - Amended

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2016

1. ID No. 000793718

2. Exact Name of the Limited Liability Company BARE Laser Hair Removal 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

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

PROVIDE LASER HAIR REMOVAL SERVICES

5. Principal Office Address

No. and Street: 9 SUMMER STREET, #101A

City or Town: FRANKLIN

State: MA

Zip: 02038

Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: MARYLOU VALERIO Contact Title: MANAGER

No. and Street: 9 SUMMER STREET, #101A

City or Town: FRANKLIN

State: MA

Zip: 02038

Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.

DO NOT LIST MEMBERS

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	MARYLOU VALERIO	9 SUMMER STREET, #101A FRANKLIN, MA 02038 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER

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

JOSEPH B. WHITE, ESQ. ROBINSON & COLE LLP ONE FINANCIAL PLAZA, SUITE 1430
PROVIDENCE , RI 02903

Signed this 23 Day of March, 2017 at 2:40:24 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 MARYLOU VALERIO
Signature of Authorized Person

Form No. 632
Revised 09/07

© 2007 - 2017 State of Rhode Island and Providence Plantations
All Rights Reserved