



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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2017 MAR 24 PM 3:49

 Annual Report for the year: 2016
 Limited Liability Company

- Filing period: September 1 - November 1
 → Filing Fee: \$50.00
 → Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number <u>941892</u>		2. Exact name of the Limited Liability Company <u>The Blowing Tree LLC</u>			
3. NAICS Code <u>81</u>		4. Brief description of the character of business conducted in Rhode Island <u>ART Sales/ Horticulture Lab</u>			
5. State of Formation <u>RI</u>					
6. Principal Office Address <u>119 Black Plain Road</u>			City <u>Exeter</u>	State <u>RI</u>	Zip <u>02822</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>Christopher J Paul JR</u>			Contact Title <u>Owner</u>		
Street Address <u>119 Black Plain Rd</u>			City <u>Exeter</u>	State <u>RI</u>	Zip <u>02822</u>
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
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.					
Name of Authorized Person <u>Chris Paul JR</u>				Date <u>03-24-17</u>	
Signature of Authorized Person <u>[Signature]</u>					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040

Website: www.sos.ri.gov

FILED

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BY 299190

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FORM 632 - Revised: 08/2016