

State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

R.I. DEP I. OF STATE
BUS SYNS DIV
2017 APR -5 AM 9: 52

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	2. Exact	name of the Limi	ited Liability Company			
000799852		The Providence Plastic Project, LLC.				
3. NAICS Code	4. Brief de	Brief description of the character of business conducted in Rhode Island				
44-45 - Retail Trade	Retail sa	Retail sales of upcycled goods				
5. State of Formation	7					
Rhode Island						
6. Principal Office Address	<del></del>		City	State	7:n	
485 Hatchery Rd.			North Kingstown	RI	Zip <b>02852</b>	
7. Mailing Address of Limited Lia	ability Comp	any and Name c	or Title of Contact Person			
Robert Wells			Contact Title Partner			
Street Address 485 Hatchery Rd.			City North Kingstown	State RI	Zip <b>02852</b>	
3. List ALL managers (names ar	nd addresser	s) of the Limited	Liability Company, IF APPLICABLE	- DO NOT LIST !	 MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address	Street Address			Street Address		
			Street Address	Sireet Address		
City	State	Zip	City	State	Zip	
Desident Agent in Physic Jales			C	heck the box to in	ndicate an attachment	
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statements, and that all stateme	are ann amir	TM that I have ex	remarka and shift in the same of the same	y accompanying	schedules and	
lame of Authorized Person			WC 0310 0017 CCL	Date		
Robert Wells				3/4/2017	,	
ignature of Authorized Person	1 -0					
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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 300/169

FORM 632 - Revised: 08/2016