s s	tate of Rhode Is Office of	sland and Pro of the Secreta		tions Fee: \$50.00
		sion Of Business 148 W. River St vidence RI 0290 (401) 222 30/	reet 4-2615	
HOPE		(401) 222-304	ŧ0	
Limited Liability Com Annual Report Filing Period: September 1				
In accordance with R.I.G.L. to file its annual report withi 16-66(b&c)) is subject to a p	n thirty (30) days aft	ter the time prescr		
ANNUAL REPORT YEAR:	<u>2016</u>			
1. ID No. 001658185				
2. Exact Name of the Limited Liability Company <u>ERRLY BIRD LLC</u>				
3. State of Formation				
State: <u>RI</u>				
ARTICLE III				
Using the following NAICS codes, please select the code that best describes your business.				
NAICS Code 6 81				
			*	
4. Brief Description of the	e Character of the	Business Which	is Actually Condu	icted in Rhode Island
ERRLYBIRD PROVIDES CLIENTS WITH HORTICULTURAL SOLUTIONS				
5. Principal Office Addres	SS			
No. and Street: <u>15</u>	URSULA RD			
City or Town: <u>SN</u>	MITHFIELD	State: <u>RI</u>	Zip: <u>02917</u>	Country: <u>USA</u>
6. Mailing Address of Lir	nited Liability Com	npany and Name	or Title of Contac	t Person:
	Title: <u>MEMBER</u> <u>URSULA RD</u> IITHFIELD	State: DI	7in: 02017	Country: USA
,		State: <u>RI</u>	Zip: <u>02917</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS				
Title	Individual Name		Address	
	First, Middle,	Last, Suffix	Address, City or Tov	vn, State, Zip Code, Country
8. RESIDENT AGENT IN F Changes Require Filing				

ANDREW GIANGRECO 15 URSULA ROAD SMITHFIELD , RI 02917

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

Signed this 10 Day of April, 2017 at 1:14:43 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 ANDREW GIANGRECO

Signature of Authorized Person

Form No. 632 Revised 09/07

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