RI SOS Filing Number: 201741492130 Date: 4/20/2017 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year:

Limited Liability Company

R.I. DEPT. OF STATE BUS SYCS DIV

2017 APR 20 PM 12: 30

→ 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 Limited Liability Company				
1661059	Commercial Flooring Group				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
3	Froring				
5. State of Formation					
RI					
6. Principal Office Address			City	State	Zip
53 High St Suite 305			WESTERLY	RI	03881
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name John Maccions			Contact Title		
Street Address 53 High St Duite 305			City DESTERLY	State (2.1	Zip O287
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name John Maccion E 1			Manager Name		
Street Address 53 High 5+ Duice 305			Street Address		
City USESTERY	State	COJEC!	City	State	Zip
Manager Name Chrestine Maccion E			Manager Name		
Street Address 53 HISN ST SUICE 305			Street Address		
City WESTERLY	State PL	Zip 0289	City	State	Zip
Check the box to indicate an attachment					
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 Date					
John Macci	one			9/20/	17
Signature of Authorized Person					
Mah Macetoc SIGN DOCUMENT HERE					

MAIL 90:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED

ADD 2 n 2017

BY 301469

FORM 632 - Revised: 02/2017