



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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.

2017 MAY 19 AM 10:50
 R.I. DEPT. OF STATE
 BUSINESS SERVICES DIVISION

1. Entity ID Number 141189		2. Exact name of the Limited Liability Company Rhode Island Portable Storage, LLC			
3. NAICS Code 53 - Real Estate and Rental ar		4. Brief description of the character of business conducted in Rhode Island Short term rental of portable storage units			
5. State of Formation Florida					
6. Principal Office Address 1345 George Jenkins Blvd			City Lakeland	State FL	Zip 33815
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Robert Criss			Contact Title CFO		
Street Address 1345 George Jenkins Blvd			City Lakeland	State FL	Zip 33815
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 Robert Criss				Date 05/01/17	
Signature of Authorized Person Robert Criss <small>Digitally signed by Robert Criss DN: cn=Robert Criss, o=L Office Solutions, LLC, email=robertcriss@office-solutions.net, c=US Date: 2017.05.01 14:09:10 -0400</small>					

MAIL TO:

Division of Business Services

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FILED

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