of Atate of Rhade Asland and Broxidence Plantations Perpetrometate f Statings & Geineses Stainistes Division Nellie M. Gorbea, Secretary of State Annual Report for the year: **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. 2. Exact name of the Limited Liability Company of the character of business conducted in Rhode Island 5. State of Formation 6. Principal Office Address City State 02806 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Name Contact Title State Street Address 02806 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 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 Date

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040

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**Business** Section

Phone: 401-222-3040 corporations@sos.ri.gov

**First Stop Business** Information Center Phone: 401-222-2185

businessinfo@sos.ri.gov

Notary & Trademark **Sections** 

Phone: 401-222-3040 notaries@sos.ri.gov

**Uniform Commercial** Code Section (UCC) ORM 632 Authentications

Phone: 401-222-3040 ucc@sos.ri.gov

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