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STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

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

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

2014

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR $^{-1}$

Filing Fee: \$50.00 •	FAILURE TO F	ILE THIS REPORT E	BY DECEMBER 1 WILL RES	SULT IN A \$25.00 P	ENALTY FEE
¹ ʊʊʊ७७ 98354	²o liveri e¹	me-of the limited liabilit	5		
3. State of Formation Connecticut	Gerief de l	Colony Lench edf	r of business conducted in Rhod	le Island	STATE STATE OF THE PHILE: 0
5 Principal office address 22 Bayview Avenue Unit 61			City StonIngton	State	7 06378
	LIMITED LIABILI	TY COMPANY AND N	AME OR TITLE OF CONTACT F	PERSON:	
Contact Name Chris Errichetti			Contact Title Office Manager		
Street Address 8 Stonington Commons Unit 39			Stonington	State	7in 06378
7. LIST ALL MANAGERS (("X" BOX FOR ATTACHI	NAMES AND AD	DRESSES) OF THE LI	MITED LIABILITY COMPANY, II	F APPLICABLE - DO	NOT LIST MEMBERS
Manage Mana			Manager Name		
9			Street Address		
Ć	ξ	Zin	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RI	ODE ISLAND				<u> </u>
This information is current	ly of record in th	e Office of the Secret	ary of State. Changes require	filing Form 642.	
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				JUN 0 (6 2017 12:03
				BY Ch	6 2017 12:03 305320
File Date			this report, including and that all statement	any accompanying is contained herein a	firm that I have examined schedules and statements are true and correct. 212 22 3 Date

Print or Type Name of Authorized Person

Form No. 632 Revised: 01/2012