RI SOS Filing Number: 201749185160 Date: 9/5/2017 10:52:00 AM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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2017 SEP -5 AM 10: 50

Annual Report for the year: 20/7**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.

Entity ID Number 2. Exact name of the Limited Liability Company					
1 . 1	2. Exact name of the Limited Liability Company				
150844	DJ. Providence Co. UC				
3. State of Formation	4. Brief description of the character of business conducted in Rhode Island				
Rhode Island McDonald's Rostqurant					
5. Frincipal Office Address			City	State	Zip
100 Weymouth ST G-1 Rear			Rockland	nx	02370
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Bowers			Office Manager		
Street Address 100 Waymowth ST Unit G-1			CityRockland	State	Zip 2370
7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name 0540h Napoli			Manager Name		
Street Address Weymouth ST G-1			Street Address		
Rockland	State	^{Zip} 02370	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment					
8. Resident Agent in Rhode Island. This information is currently of record in 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	
Anna Bowers				9.1.	207
Signature of Authorized Person					
China Bower					

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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

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