RI SOS Filing Number: 201749473960 Date: 9/8/2017 4:00:00 PM

State of Rhode Island and Providence Plantations Department of State - Business Services Division	
Annual Report for the year: 2017 Limited Liability Company	نز ، نز ،
 → 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	1. Entity ID Number 2. Exact name of the Limited Liability Company						
×1 160089 5	The Great Escape Room Providence LLC						
3. NAICS Code 71 We provide A unique team building experience by							
5. State of Formation Combining Collaborative puzzle solving with tennwork Florida in a clever, fun and safe environment.							
6. Principal Office Address 530 Woodstead Court			City .	State FL	Zip		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name	Contact Title Accounting						
Street Address 530 Woodstead Court			CityLongwood	State FL	Zip 32779		
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name Amanda Maloney Manager Name							
Street Address 146 Westminster St			Street Address				
City Providence	State RI	Zip Q2903	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	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 M. Joseph M. Manus Date 8/29/201				9/2017			
Signature of Authorized Person M. Start bog Unit of HERE							
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MAIL TO:

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

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

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FORM \$32 - Revised: 02/2017