s	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
Division Of Business Services			
148 W. River Street Providence RI 02904-2615			
HOPE	(401) 222-304		
Limited Liability Com Annual Report Filing Period: September 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2017			
1. ID No. <u>000574940</u>			
2. Exact Name of the Limited Liability Company <u>WINCIN, LLC</u>			
3. State of Formation			
State: <u>RI</u>			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download			
the list of codes here. More information on NAICS can be found online.			
<u>531110</u>			
4. Brief Description of th	e Character of the Business Which	is Actually Conducted in Rh	ode Island
THIS LIMITED LIABILITY COMPANY IS CREATED AS A PROTECTION FOR THE			
PROPERTIES ON: 229, 233,237 AND 241 BULLOCKS POINT AVE. RIVERSIDE, RI			
02915. THESE ARE RENTAL PROPERTIES.			
5. Principal Office Address			
No. and Street:229 BULLOCKS POINT AVENUECity or Town:EAST PROVIDENCEState: RIZip: 02915Country: USA			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title:			
No. and Street:10 ALLEN AVENUECity or Town:EAST PROVIDENCEState: RIZip: 02915Country: USA			
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip C	Code, Country

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

<u>CINDY CHUN</u> <u>10 ALLEN AVENUE</u> <u>RIVERSIDE</u>, <u>RI</u> <u>02915</u>

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 13 Day of September, 2017 at 10:34:39 PM by the authorized person. This

electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

By <u>CINDY CHUN</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

 $\textcircled{\mbox{\sc only}}$ 2007 - 2017 State of Rhode Island and Providence Plantations All Rights Reserved