RI SOS Filing Number: 201749986640 Date: 9/15/2017 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	⊈ t
→ Filing period: September 1 - November 1 → Filing Fee: \$50.00	

→ Penalty: Additional \$2	25.00 fee if form	is not filed by D	ecember 1.	<del>-</del> -			
1. Entity ID Number	2. Exact na	2. Exact name of the Limited Liability Company					
1663712	10 Rounds	10 Rounds Lane, LLC					
3. NAICS Code		scription of the clean	naracter of business conducted ership	in Rhode Island			
5. State of Formation							
Rhode Island							
6. Principal Office Address			City	State	Zip		
155 South Main Street, Suite 405			Providence	Ri	02903		
7. Mailing Address of Limite	ed Liability Compa	any and Name or	Title of Contact Person	<b>.</b>	<u></u>		
Contact Name Charles H. Boisseau			Contact Title				
Street Address 155 South Main Street, Suite 405			City Providence	State RI	<sup>Zıp</sup> 02903		
8. List ALL managers (nam	nes and addresse	s) of the Limited	Liability Company, IF APPLICAE	BLE - 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	Zıp	City	State	Zıp		
		<del></del> I		Check the box to	indicate an attachment		
9. Resident Agent in Rhode	e Island. This inform	nation is currently (	of record with the Department of Sta	ite. Changes require fili	ng Form 642.		
Under penalty of perjury, statements, and that all s	l declare and aff tatements conta	irm that I have e ined he <u>rein</u> are	examined this report, includin true and correct.	g any accompanyin	g schedules and		
Name of Authorized Person			•	Date			
Charles H. Boisseau	VIII	1/2	2)	1 9	-12-17		
Signature of Authorized Per	rson	1 160	<del></del>				
		a 31	H DOKUMENT HURL				

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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BY 12264 0011

FORM 632 - Revised: 02/2017