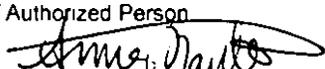




State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2017
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.

1. Entity ID Number 001657040		2. Exact name of the Limited Liability Company ALPHA Works, LLC					
3. NAICS Code 531390		4. Brief description of the character of business conducted in Rhode Island REAL ESTATE HOLDING COMPANY					
5. State of Formation RI							
6. Principal Office Address 2154 BROAD ST., REAR, UNIT D				City CRANSTON		State RI	Zip 02905
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name AMIE PLANTE				Contact Title OWNER			
Street Address 2154 BROAD ST., REAR, UNIT D				City CRANSTON		State RI	Zip 02905
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - 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	Zip	City		State	Zip
Check the box to indicate an attachment <input type="checkbox"/>							
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 AMIE PLANTE						Date 9/17/17	
Signature of Authorized Person 				SIGN DOCUMENT HERE			

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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SEP 18 2017 *or*

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