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 cled by December 1.

1 Entity ID Number	2 Exact name of the Limited Liability Company				
1081126	Arborcare Stump Grinding LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
561730	Stump grinding				
5. State of Formation	]	-			
Phode Island					
6 Principal Oi de Address			City	State	Zip
2 Lucas Ave AP+ 2			Newport	RI	02840
7 Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Jesse Baillargeron			Contact Title OWNER		
Street Address 2 LUCOS ANE AP+ 2			new Port	State PI	02840
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name JESSE Baillargeron			Manager Name		
Street Address 2 CUCOS ANE APT 2			Street Address		
CITY NEWPORT	State	02840	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zıp
			Ch	eck the box to in-	dicate an attachment
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require Jing Form 642					
Under penalty of perjury. I declare and aum 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	
Jesse Bai	llarger	(on		SCP+	13, 2017
Name of Authorized Person  Jesse Baillargeron  Signature of Authorized Person  Signature of Authorized Person					
July July					

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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FCRM 632 - Revised - 08/2017