RI SOS Filing Number: 201750136960 Date: 9/20/2017 4:00:00 PM

Annual Report for the Limited Liability Co → Filing period: Septer → Filing Fee: \$50.00 → Penalty: Additional \$2	mpany mber 1 - Noveml	ber 1	ecember 1.	_		
1. Entity ID Number 937890		2. Exact name of the Limited Liability Company CONEY ISLAND VENTURES, LLC				
5. State of Formation	4. Brief desconsulting	•	haracter of business conducted in	Rhode Island		
6. Principal Office Address			City	State	Zip	
5600 Post Road, #114-354			East Greenwich	RI	02818	
7. Mailing Address of Limite	ed Liability Compa	any and Name o	r Title of Contact Person			
Contact Name Stephen Sieg	gel		Contact Title			
Street Address 5600 Post Road, #114-354			City East Greenwic	State RI	Zip 02818	
8. List ALL managers (nan	nes and addresse	s) of the Limited	Liability Company, IF APPLICABLE	E - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zıp	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zıp	
	ı		.	Check the box to	indicate an attachment	
				Changes require filii		

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MAIL TO:

Division of Business Services

Signature of Authorized Person

148 W. River Street, Providence, Rhode Island 02904-2615

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

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