STAMP

FOR SECRETARY OF STATE USC ONLY

- → Filing period: September 1 November 1
- → Filing Fee: \$50,00
- → Penalty: Additional \$25.00 fee if form is not filed by December 1.

Entity ID Number 2. Exact name of the Limited Liability Company					
962151 FOUR PAWS OF RHODE ISLAND, LLC					
3. NAICS Code	4 Brief description of the character of business conducted in Rhode Island				
53 ///	purchase and sale of real estate and renovating and improvement of buildings on said				
5. State of Formation	real estate				
Rhode Island					
6. Principal Office Address			City	State	Zıp
343 Warwick Avenue			Warwick	RI	02888
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name John D. Biafore			Contact Title Attorney		
Street Address 478A Broadway			City Providence	State RI	^{Zip} 02909
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Charles Callanan			Manager Name		
Street Address 30 Eldredge Avenue			Street Address		
City East Greenwich	State RI	^{Zip} 02818	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zıp
Check the box to indicate an attachment					
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 Date					
Charles Callanan, Manager 26 Sep 2017					
Signature of Authorized Person SICH SOCUMENT 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

FILED SEP 2 9 2017

FORM 632 - Revised: 08/2017