s s	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River S	treet	
HOPE	Providence RI 0290 (401) 222-30		
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability com n thirty (30) days after the time presc penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2017</u>		
1. ID No. <u>001056063</u>	3		
2. Exact Name of the Li	mited Liability Company <u>ALEX A</u>	ND ANI INTERNATIONA	L, LLC
3. State of Formation			
State: <u>DE</u>			
	ARTICLE III		
-	Code that best describes the primary e information on <u>NAICS</u> can be found		ity. Download
<u>813910</u>			
4. Brief Description of th	e Character of the Business Which	is Actually Conducted in Rh	ode Island
RETAIL SALE OF JEW AND ACCESSORIES	ELRY, BEAUTY PRODUCTS, C	COSMETICS, APPAREL, HO	OME GOODS
5. Principal Office Addre	SS		
	<u>CHAPEL VIEW BLVD.</u> E 360		
City or Town: <u>CRA</u>	<u>NSTON</u> S	tate: <u>RI</u> Zip: <u>02920</u> Cou	intry: <u>USA</u>
6. Mailing Address of Li	nited Liability Company and Name	e or Title of Contact Person:	
Contact Name: Contact			
No. and Street: <u>2000</u> SUITE	<u>CHAPEL VIEW BLVD.</u> <u>5360</u>		
City or Town: CRAN	I <u>STON</u> SI	ate: <u>RI</u> Zip: <u>02920</u> Cou	intry: <u>USA</u>
7. Name and Address of DO NOT LIST MEMBEI	Each Manager of the Limited Liab २S	ility Company, if Applicable	
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip	Code, Country

## 8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

<u>CT CORPORATION SYSTEM</u> <u>450 VETERANS MEMORIAL PARKWAY, SUITE 7A</u> <u>EAST</u> <u>PROVIDENCE</u>, <u>RI</u> <u>02914</u>

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 2 Day of October, 2017 at 12:18:20 PM by the authorized person.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.* 

By <u>KELLY LETTMANN</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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