s	tate of Rhode Island and Pro	vidence Plantations	Fee: \$50.00	
	Office of the Secreta	ry of State		
	Division Of Business	Services		
	148 W. River Street			
Providence RI 02904-2615				
HOPE	(401) 222-30	40		
Limited Liability Com Annual Report Filing Period: September 1				
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7- 16-66(b&c)) is subject to a penalty fee of \$25.00.				
ANNUAL REPORT YEAR: 2017				
1. ID No. <u>001666677</u>				
2. Exact Name of the Limited Liability Company <u>CRUNCHI, LLC</u>				
3. State of Formation				
State: <u>FL</u>				
ARTICLE III				
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online. 446120				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
DIRECT SALES OF COSMETICS ONLINE AND BY INDEPENDENT CONSULTANTS.				
5. Principal Office Address				
No. and Street:1241 SE INDIAN STREET, UNIT 110City or Town:STUARTState:FLZip:34997-5675Country:USA				
Gity OF TOWIL STUAR	<u> </u>	ταις, <u>ΓΕ</u> Ζιμ. <u>34337-3073</u> CC	ounu y. <u>USA</u>	
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: Contact Title: No. and Street: <u>1241 SE INDIAN STREET, UNIT 110</u> City or Town: <u>STUART</u> State: <u>FL</u> Zip: <u>34997-5675</u> Country:				
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS				
Title	Individual Name	Address		
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Co	ode, Country	
MANAGER	DANTE WESTON	1241 SE INDIAN STREET, STUART, FL 34997 USA		
MANAGER	KELLY WESTON	1241 SE INDIAN STREET,	UNIT 110	

STUART, FL 34997 USA

1241 SE INDIAN STREET, UNIT 110 STUART, FL 34997 USA

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

INCORP SERVICES, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

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

Signed this 6 Day of October, 2017 at 3:15:47 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 KELLY WESTON

Signature of Authorized Person

Form No. 632 Revised 09/07

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