RI SOS Filing Number: 201751285360 Date: 10/10/2017 4:00:00 PM

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the y Limited Liability Compa → Filing period: September → Filing Fee: \$50.00 → Penalty: Additional \$25.00	any 1 - November 1		nber 1.		ECEIVED PI. OF STATE SVCS DIV
1. Entity ID Number	2. Exact name of the Umited Liability Company				
000813291	Hire Fre and Retine, ILC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
541612	Consulting				
5. State of Formation	1	7			
RI				_	
6. Principal Ofice Address			City	State	Zip
66 JUHN 84.			Providence	RI	ಡಾ 6
7. Mailing Address of Limited Lie	bility Company a	nd Name or Title	of Contact Person		
Contact Name JUANNOR MARRIS			Contect Title Princy 7		
Street Address Po Oux 9483			City Prodicerce	State RI	20029.40
			ity Company, IF APPLICABLE - D	O NOT LIST ME	
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
	l	<u> </u>	Che	ck the box to indi	cate an attachment
9. Resident Agent in Rhode Islan	nd. This information	is currently of reco	ord with the Department of State. Char		
Under penalty of perjury, i dec statements, and that all staten	lare and afzrm t rents contained	hat I have exam herein ere true	ined this report, including any a and correct.	accompanying s	chedules and
Name of Authorized Person	HAURRIS	· · ·		Date	10/17
Signature of Authorized Person	the	SIGN DOC	CUMENT 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**

OCT 10 2017

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