St	ate of Rhode Island and Pro Office of the Secreta		ONS Fee: \$50.0
	Division Of Business 148 W. River S	treet	
HOPE	Providence RI 0290 (401) 222-30		
Limited Liability Comp Annual Report Filing Period: September 1 -			
	7-16-66(d), each limited liability com thirty (30) days after the time presc enalty fee of \$25.00.		
ANNUAL REPORT YEAR:	2017		
1. ID No. <u>000799161</u>			
2. Exact Name of the Lim	ited Liability Company <u>NPRTO</u>	NORTH-EAST, LL	. <u>C</u>
3. State of Formation			
State: <u>UT</u>			
	ARTICLE III		
Enter the six diait NAICS C		business conducted b	by the entity. Download
0	ARTICLE III ode that best describes the primary information on <u>NAICS</u> can be found		by the entity. Download
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the list of codes <u>here.</u> More	ode that best describes the primary information on <u>NAICS</u> can be found	online.	
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the list of codes <u>here.</u> More <u>532290</u> <b>4. Brief Description of the</b> <u>RENT TO OWN FOR CO</u> <b>5. Principal Office Addres</b> No. and Street: <u>256 Y</u> City or Town: <u>DRA</u> <b>6. Mailing Address of Lim</b> Contact Name: Contact T	Description       Description         Information on NAICS       Can be found         Character of the Business Which         DNSUMER AND HOUSEHOLI         S         W DATA DRIVE         PER       State: I         ited Liability Company and Name         itle:         V DATA DRIVE	online. <b>is Actually Conduc</b> <u>D GOODS.</u> <u>JT</u> Zip: <u>84020</u> <b>e or Title of Contact</b>	ted in Rhode Island
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the list of codes <u>here.</u> More <u>532290</u> <b>4. Brief Description of the</b> <u>RENT TO OWN FOR CO</u> <b>5. Principal Office Addres</b> No. and Street: <u>256 Y</u> City or Town: <u>DRA</u> <b>6. Mailing Address of Lim</b> Contact Name: Contact T No. and Street: <u>256 V</u> City or Town: <u>DRA</u> <b>7. Name and Address of I</b>	Description   Description   NAICS   Character of the Business Which   DNSUMER AND HOUSEHOLI   S   W DATA DRIVE   PER   State: I   ited Liability Company and Name   itle:   V DATA DRIVE   PER   State: I   Each Manager of the Limited Liab	online.   is Actually Conduction   D GOODS.   JT Zip: 84020   e or Title of Contact   IT Zip: 84020   oility Company, if Appendix	eted in Rhode Island Country: <u>USA</u> Person: Country: <u>USA</u> oplicable.
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## 8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

CORPORATION SERVICE COMPANY 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 11 Day of October, 2017 at 9:03:30 AM 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>TARALYN JONES</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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