

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2017
Limited Liability Company

- → Filing period: September 1 November 1
- → Filing Fee \$50.00
- → Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 1337890	1	2 Exact name of the Limited Liability Company TG Holdings, LLC				
3 NAICS Code 6 1 6 9 5. State of Formation Rhode Island	Brief description of the character of business conducted in Rhode Island Sale of firearms					
6 Principal Office Address 337 Post Road			City Wakefield	State RI	Zip 02879	
7. Mailing Address of Limited L	iability Compa	any and Name o				
Contact Name Tim Gray			Contact Title Member			
Street Address 337 Post Road			City Wakefield	State RI	^{Zip} 02879	
8 List ALL managers (names	and addresse	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST I	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zıp	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
		<u> </u>		Check the box to i	indicate an attachment	
9 Resident Agent in Rhode Isl	land. This inforr	nation is currently	of record with the Department of St	ate. Changes require filir	ng Form 642	
Under penalty of perjury, I d statements, and first all state			examined this report, includi true and correct.	ng any accompanyin	g schedules and	
Name of Authorized Person Tim Gray				Date 9)	Slir	
Signature of Authorizad Perso	n	SIG	N DOCUMENT HERE			

MAIL TO:

Division of Business Services

148 W. River Street, Provide ce/Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos ri gov **FILED**

OCT 1 0 2017

BY 3678 KM

FORM 632 - Revised: 02/2011