

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year:	2012
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	2. Exact na	ame of the Limite	ed Liability Company	m:			
		NESQUAGE MINEARY UC					
3 NAICS MASSA		Brief description of the character of business conducted in Rhode Island					
531100	e	Ron Esmot					
5 State of Formation		1001121					
es							
6. Principal Office Address			City	State	Zip		
31 Johnson As			NAKLAGANSEN	RI	02852		
7. Mailing Address of Limite		any and Name or	Title of Contact Person	•	<u> </u>		
Contact Name DAVID SERVA			Contact Title WANGER				
Street Address 30 OAK ST #3			CHARLE STAN	State MA	202129		
8 List ALL managers (nam	es and addresse	s) of the Limited	Liability Company IF APPLICABLE	- DO NOT LIST	MEMBERS		
Manager Name Manager Name			Manager Name				
Street Address			Street Address	Street Address			
City 1 www	State	Zip 4	City	State	Zip		
Manager Name			Manager Name				
Street Address			Sireel Address				
City	State	Zip	City	State	Zip		
	<u></u>			Check the box to	indicate an attachment		
9 Resident Agent in Rhode	Island This infor	nation is currently (of record with the Department of Stale	Changes require fil	ing Form 642		
Under penalty of perjury, statements, and that all st			examined this report, including a true and correct.	ny accompanyli	ng schedules and		
Name of Authorized Person			Date				
DAVID SEAPA			10-5-17				
Signature of Authorized Per	sop /						
	W/						
	U						

MAIL TO:

Division of Business Services

148 W. River Street: Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos nigov

OCT 1 0 2017

FORM 632 - Revised: 08/2016