



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

STAMP

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.

FORM
SECRETARY OF STATE
PROVIDENCE, RI

1. Entity ID Number 161583		2. Exact name of the Limited Liability Company Lemongrass, LLC			
3. NAICS Code 72 - Accommodation and Food		4. Brief description of the character of business conducted in Rhode Island Restaurant business. 722511			
5. State of Formation RI					
6. Principal Office Address 102-104 Ives Street		City Providence		State RI	Zip 02906
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Andrew G. Nault, Esq.			Contact Title Corporate Counsel		
Street Address 1334 Mendon Road		City Cumberland		State RI	Zip 02864
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
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
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
<i>Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.</i>					
Name of Authorized Person LISA KUSCU				Date 10/9/17	
Signature of Authorized Person 				SIGN DOCUMENT HERE	

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.n.gov

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OCT 12 2017

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