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.

Entity ID Number		2. Exact name of the Limited Liability Company					
1340585	GLOW LLC	GLOW LLC					
3. NAICS Code	4 Brief desc	4 Brief description of the character of business conducted in Rhooe Island					
	Sale of oil a	Sale of oil and petroleum products.					
5. State of Formation Rhode Island	45359	453591					
6. Principal Office Address			City	State	Zıp		
101 Corliss Street			Providence	RI	02904		
7. Mailing Address of Limite	ed Liability Compan	y and Name or Tit	le of Contact Person	· · · · · · · · · · · · · · · · · · ·			
Contact Name Guido R. Salvadore			Contact Title Registered Agent				
Street Address 10 Weybosset St., Suite 303			City Providence	State RI	^{Z_{IP}} 02903		
8. List ALL managers (nan	nes and addresses)	of the Limited Lia	bility Company, IF APPLICAL	BLE - DO NOT LIST	MEMBERS		
Manager Name John C. Santoro Mana			Manager Name	Manage: Name			
Street Address 101 Corliss Street		Street Address					
City Providence	State RI	Z _{ID} 02904	City	State	Zıp		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zιρ		
	1		<u> </u>	Check the box to	indicate an attachment		
9. Resident Agent in Rhod	e Island, This inform	ation is currently of r	ecord with the Department of Sta	ate. Changes require tili	ng Form 642		
Under penalty of perjury statements, and that all s			amined this report, includir ue and correct.	ng any accompanyir	ng schedules and		
Name of Authorized Person			Date				
John C. Santoro, Manager				9/ 1/17	,		
Signature of Authorized Pe	eson	SIGN	DOCUMENT HERE	-			

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2515

Phone: (401) 222-3040 Website: www.sos.ri.gov OCT 13 2017