°	State of Rhode Island and Pro Office of the Secret		50.00
	Division Of Busines		
	148 W. River S Providence RI 029		
HOPE	(401) 222-30		
Limited Liability Com	npany		
Annual Report			
Filing Period: September 1	- November 1		
	. 7-16-66(d), each limited liability com in thirty (30) days after the time preso penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	: <u>2017</u>		
1. ID No. <u>00134078</u>	<u>8</u>		
2. Exact Name of the Li	mited Liability Company <u>9143 LI</u>	<u>.C</u>	
3. State of Formation			
State: <u>RI</u>			
	ARTICLE III		
	Code that best describes the primary e information on <u>NAICS</u> can be found	business conducted by the entity. Downloa online.	ad
<u>522310</u>			
4. Brief Description of th	e Character of the Business Whic	h is Actually Conducted in Rhode Island	1
WE BUY AND SELL L	AW SUIT ADVANCES		
5. Principal Office Addre	255		
	ESTERLY BRADFORD ROAD		
City or Town: WEST		State: <u>RI</u> Zip: <u>02891</u> Country: <u>USA</u>	<u>A</u>
6. Mailing Address of Li	mited Liability Company and Nam	e or Title of Contact Person:	
Contact Name: Contact	Title:		
	ESTERLY BRADFORD ROAD	States BL 7 02001 Country L	10
City or Town: WEST		State: <u>RI</u> Zip: <u>02891</u> Country: <u>L</u>	
7. Name and Address of DO NOT LIST MEMBE	f Each Manager of the Limited Lia RS	oility Company, if Applicable.	
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	,
MANAGER	JOANNA LETTERA	133 WESTERLY BRADFORD RD WESTERLY, RI 02891 US	

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

BUSINESS FILINGS INTERNATIONAL, INC. 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST PROVIDENCE , RI 02914

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 23 Day of October, 2017 at 2:20:53 PM 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>JOANNA LETTERA</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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