s	tate of Rhode Island and Pro Office of the Secreta		IS Fee: \$50.00
HOPE	Division Of Business 148 W. River S Providence RI 0290 (401) 222-30	treet)4-2615	
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability com in thirty (30) days after the time presc penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2017</u>		
1. ID No. <u>000799167</u>	<u> </u>		
2. Exact Name of the Limited Liability Company <u>PROCLAMATION ALES L.L.C.</u>			
3. State of Formation			
State: <u>RI</u>			
	ARTICLE III		
0	Code that best describes the primary e information on <u>NAICS</u> can be found	•	the entity. Download
4. Brief Description of th	e Character of the Business Whicl	n is Actually Conducted	d in Rhode Island
<u>CRAFT BREWERY AN</u>	ID ANY LAWFUL BUSINESS		
5. Principal Office Addre	SS		
	JEFFERSON BLVD RWICK State	e: <u>RI</u> Zip: <u>02886</u>	Country: <u>USA</u>
6. Mailing Address of Li	nited Liability Company and Name	e or Title of Contact Pe	erson:
Contact Name: <u>JOSHUA KARTEN</u> Contact Title: <u>VICE PRESIDENT</u> No. and Street: <u>815 JEFFERSON BLVD</u>			
City or Town: WAR	WICK Stat	e: <u>RI</u> Zip: <u>02886</u>	Country: <u>USA</u>
7. Name and Address of DO NOT LIST MEMBEI	Each Manager of the Limited Lial RS	bility Company, if Appl	icable.
Title	Individual Name	Addr	
	First, Middle, Last, Suffix	Address, City or Town, St	ate, Zip Code, Country
8. RESIDENT AGENT IN F	RHODE ISLAND - DO NOT ALTER		

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

MIRIAM A. ROSS, ESQ. <u>10 ELMGROVE AVENUE</u> <u>PROVIDENCE</u>, <u>RI</u> <u>02906</u>

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

Signed this 24 Day of October, 2017 at 11:58:11 AM 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>/S/ MIRIAM A. ROSS, ESQ.</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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