

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

STAR

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.

T	I					
1. Entity ID Number	2. Exact name of the Limited Liability Company					
792888	Cluck, LLC.					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
112920	Urban farm supply business					
5. State of Formation						
Rhode Island						
6. Principal Office Address	-		City	State	Zip	
399 Broadway			Providence	RI	02909	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Drake Patten			Contact Title			
Street Address 399 Broadway			City Providence	State RI	Zip 02909	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name Drake Patten			Manager Name			
Street Address same as above			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zıp	
Check the box to indicate an attachment						
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642						
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.						
Name of Authorized Person Drake Patter				Date 10-	Date 10-26.17	
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.ri.gov FILED

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