

R.I. DEPT OF STATE BUS SYCS DIV

2017 NOV -2 AM 11:53

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number	2. Exact name of the Limited Liability Company					
114932	LAKE VION Development, UC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
236115	NEW BOONE development					
5. State of Formation	· · · · · · · · · · · · · · · · · · ·					
RI						
6. Principal Office Address			City	State	Zip	
110 Lake VIEW Rd.			Crash	RI	02920	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name DAUIO CLUKTUN			Contact Title Meuslie			
Street Address 110 Lake V. Gw Rd.			City Crans low	State RL	Zip 02920	
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						
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				Date		
NAMIO L. CLOXIUN				11-2-1	11-2-17	
Signature of Authorized Person membre lake Vion Development 21C.						

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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By Le 316623