	State of Rhode Island and Pro Office of the Secreta		Fee: \$50.0
	Division Of Business 148 W. River St	treet	
HOPE	Providence RI 0290 (401) 222-304		
Limited Liability Co Annual Report Filing Period: September			
	.L. 7-16-66(d), each limited liability comp ithin thirty (30) days after the time presc. a penalty fee of \$25.00.		
ANNUAL REPORT YEA	R : <u>2017</u>		
1. ID No. <u>0010702</u>	21		
2. Exact Name of the	Limited Liability Company ROAST	ED AND BREWED LLC	
3. State of Formation			
State: <u>RI</u>			
	ARTICLE III		
	S Code that best describes the primary lore information on <u>NAICS</u> can be found		Download
	the Character of the Dusiness Which	in Antually Conducted in Dhed	
4. Brief Description of	the Character of the Business Which	is Actually Conducted in Rhod	ie Island
<u>COFFEE BAR, PAST</u>	RY AND SANDWICH		
5. Principal Office Add	ress		
	415 THAMES STNEWPORTState: RI	Zip: <u>02840</u> Country: <u>I</u>	USA
6. Mailing Address of I	Limited Liability Company and Name	or Title of Contact Person:	
Contact Name: BOIAN		e or Title of Contact Person:	
Contact Name: <u>BOIAN</u> No. and Street: <u>415</u>	NA GEORGIEVA Contact Title: OWNE	ER/MANAGER	r: <u>USA</u>
Contact Name: <u>BOIAN</u> No. and Street: <u>418</u> City or Town: <u>NE</u>	NA GEORGIEVA Contact Title: OWNE 5 THAMES STREET State WPORT State of Each Manager of the Limited Liab	ER/MANAGER : <u>RI</u> Zip: <u>02840</u> Country	/: <u>USA</u>
Contact Name: <u>BOIAN</u> No. and Street: <u>415</u> City or Town: <u>NE</u> 7. Name and Address	NA GEORGIEVA Contact Title: OWNE 5 THAMES STREET State WPORT State of Each Manager of the Limited Liab	ER/MANAGER : <u>RI</u> Zip: <u>02840</u> Country	

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

BOIANA GEORGIEVA 415 THAMES STREET NEWPORT , RI 02840

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

Signed this 6 Day of November, 2017 at 9:36:22 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 BOIANA GEORGIEVA

Signature of Authorized Person

Form No. 632 Revised 09/07

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