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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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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.

1. Entity ID Number	2. Exact name of the Limited Liability Company			
001340374	COTTAGE STREET INDUSTRIES, LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
53 1120	MANAGE REAL ESTATE			
5. State of Formation				
RI				
6, Principal Office Address		City	State	Zip
453 COTTAGE STREET, UNIT ZA		PAWTUCKET	RI	02861
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name NORA RABINS		CONTACT TITLE OPERATING MANAGER		
Street Address 453 COTTAGE ST., UNIT 2A		City	State	Zip 02861
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS				
Manager Name NORA RABINS		Manager Name		
Street Address 453 COTTAGE ST., UNIT 2A		Street Address		
PAWTUCKET	State Zip OZSGI	City	State	Zip
Manager Name		Manager Name		
Street Address		Street Address		
City	State Zip	City	State	Zip
		Che	eck the box to indi	cate 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				
NORA RABINS 11/6/2017				
Signature of Authorized Person				
nn				

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov NOV 07 2017

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