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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

R.I. 05 STATE

Annual Report for the year: 2017 MOV 14 PM 2: 41

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.

				 	<u> </u>
1. Entity ID Number	2. Exact name of the Limited Liability Company				
96 <i>5 3</i> 06	KBM UC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
531311	service business / property mangement				
5. State of Formation			,	•	•
RF					
6. Principal Office Address			City	State	Zip
568 WORMSK AVE			Warwok	199	02668
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Kenneth C murph 4			Contact Title Member		
Street Address U FN0190 FOR POAD			City Hantsville	State P	Zip 02-830
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name ~ OL 11			Manager Name		
Street Address Stree			Street Address		
City	State Zip	- ^	City	State	Zip
י שניו עוסעווע	11 44-			<u> </u>	
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					
Kenneth	c murp		NIC	111)	
Signature of Authorized Person					
L P					
✓ ✓ FIFN ←					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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

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