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R.I. DEPT. OF STATE BUS SEGSLOWY

2017 NOV 15 AM 10: 20

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 _ '				
1. Entity ID Number	2. Exact name of the Limited Liability Company				
000298743	VIS-A'-VIS HAIR DESIGN, LLC				
3. NAICS Code 012112	4. Brief description of the character of business conducted in Rhode Island  Hair Salon				
012112					
	Tiali Galon				
5. State of Formation					
Rhode Island					
6. Principal Office Address			City	State	Zip
377 Broadway			Providence	RI	02909
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Michelie Skrobish			Contact Title Member		
Street Address 377 Broadway			City Providence	State RI	<sup>Zip</sup> <b>02909</b>
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					
Michelle Skrobish				9-2	5-7
Signature of Authorized Person SIGN DOCUMENT HERE					
FILED					

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 15 2017

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