

R.I. DEPT. OF STATE BUS SVCS DIV

2817 NOV 16 PM 2: 59

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 142121	2. Exact name of the Limited Liability Company NITIN, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
541618	BUSINESS CONSULTING AND REAL ESTATE MANAGEMENT					
5. State of Formation						
RI						
6. Principal Office Address			City	State	Zip	
58 TELL STREET, 1F			PROVIDENCE	RI	02909	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name DEBBIE TRIVEDI			Contact Title PRESIDENT			
Street Address 58 TELL STREET, 1F			City PROVIDENCE	State RI	^{Zip} 02909	
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	Date	
DEBBIE TRIVEDI				11/01/2	11/01/2017	
Signature of Authorized Person Speak Person						

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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