Sta			
	ate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River St	reet	
HOPE	Providence RI 0290 (401) 222-304		
Limited Liability Comp Annual Report Filing Period: September 1 -			
	7-16-66(d), each limited liability comp thirty (30) days after the time presci enalty fee of \$25.00.		
ANNUAL REPORT YEAR:	2017		
1. ID No. <u>000791261</u>			
2. Exact Name of the Limited Liability Company <u>NIGHT OWL RESTAURANT GROUP, LLC</u>			
3. State of Formation			
State: <u>RI</u>			
	ARTICLE III		
-	ode that best describes the primary	ousiness conducted by the entit	ty. Download
the list of codes <u>here.</u> More	information on <u>NAICS</u> can be found	online.	
the list of codes <u>here.</u> More	information on <u>NAICS</u> can be found	online.	
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722551 4. Brief Description of the OPERATE RESTAURAN 5. Principal Office Address No. and Street: 44 B City or Town: CRA 6. Mailing Address of Lim Contact Name: LESLEY F No. and Street: 44 B City or Town: CRA 7. Name and Address of E DO NOT LIST MEMBERS	Character of the Business Which AT BUSINESS s EDSON ROAD ANSTON State: R ited Liability Company and Name RICH Contact Title: EDSON ROAD NSTON State: R EDSON ROAD NSTON State: R EDSON ROAD State: R EDSON ROAD State: R EDSON ROAD NSTON State: R Each Manager of the Limited Liab S	is Actually Conducted in Rh I Zip: 02910 Countr or Title of Contact Person: I Zip: 02910 Countr Or Title of Contact Person: I Zip: 02910 Countr I Zip: 02910 Countr ility Company, if Applicable.	ode Island ry: <u>USA</u> ry: <u>USA</u>

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

LESLEY S. RICH, ESQ. 44 BEDSON ROAD CRANSTON, RI 02910

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

Signed this 17 Day of November, 2017 at 5:39:26 PM 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 /LESLEY S RICH/ Signature of Authorized Person

Form No. 632 Revised 09/07

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