s s	tate of Rhode Island and Pro Office of the Secreta		NS Fee: \$50.00
	Division Of Business	Services	
148 W. River Street			
Providence RI 02904-2615			
HOPE	(401) 222-30	40	
Limited Liability Com Annual Report Filing Period: September 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7- 16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2017			
1. ID No. <u>000584760</u>			
2. Exact Name of the Limited Liability Company Safe @ Home, LLC			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online. 541613			
<u>341015</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
DEVELOPMENT, SALES AND MARKETING OF PRODUCTS			
5. Principal Office Addres	SS		
No. and Street: 9 CC	OLLINS AVENUE		
	STERLY State:	<u>RI</u> Zip: <u>02891</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact	Title:		
No. and Street: 9 CC	<u>DLLINS AVENUE</u>		
City or Town: WES	STERLY State:	<u>RI</u> Zip: <u>02891</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Add	ress
	First, Middle, Last, Suffix	Address, City or Town, S	State, Zip Code, Country
8. RESIDENT AGENT IN R	HODE ISLAND - DO NOT ALTER		

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

DREW P. KAPLAN, ESQ. ONE PARK ROW, SUITE 300 PROVIDENCE , RI 02903

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

Signed this 22 Day of November, 2017 at 1:27:16 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 <u>NEIL FRADIN</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

 $\textcircled{\mbox{\sc only}}$ 2007 - 2017 State of Rhode Island and Providence Plantations All Rights Reserved