RI SOS Filing Number: 201855938180 Date: 1/10/2018 4:00:00 PM

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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	2. Exact name of the Limited Liability Company				
157578	HIVE BUILDING -CLC				
3. NAICS Code 236118	4. Brief description of the character of business conducted in Rhode Island				
5. State of Formation	CONSTRUCTION/ REMODELING				
6. Principal Office Address 115 MASSASOIT AUE			CILAN STOW	State P	zip 02905
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name MOORE NOORE			Contact Title NEWT MAWNGER		
Street Address 115 MASSASOIT AVE			CITY ANS TOU	State 1	zip 2905
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name CHLISTOPHEX MOORE			Manager Name		
Street Address 115 M455 USO17 NE			Street Address		
CITY RUNSTON		<sup>Z10</sup> 02905	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zıp	City	State	Zip
			Ch	eck the box to ind	icate 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  CHRISTONIEL MOORE				Date /10/2018	
Signature of Authorized 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 **FILED** 

JAN 1 0 2018

BY AC 321469