RI SOS Filing Number: 201858927910 Date: 2/23/2018 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV

2018 FEB 23 P序泡色图

Annual Report for the year: 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 na	ame of the Limit	ed Liability Company			
978737		· SAN	doval LU			
NAICS Code 4. Brief description of the character of business conducted in Rhode Island						
181111	1 n	.40	Sollac			
5. State of Formation	1 M		DAIRS			
17+						
6. Principal Office Address	<u> </u>					
√ ∀ √ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′ ′			City	State	Zip	
165 Main St			tauticket	K	02860	
7. Mailing Address of Limited L	iability Compa	any and Name o	· 		· -	
Contact Name Kafael Sawdoval			Contact Title			
Street Address 26 Illian Ave			CityProvidence	State	zi82905	
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 Isl	and. This inform	nation is currently	of record with the Department of State			
	eclare and aff	firm that I have	examined this report, including			
Name of Authorized Person				Date	/ /	
KAfael Sa.	•			22/18		
Signature of Authorized Person	1					
Kafael Sanderel						
/ 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 FEB 2 3 2018

BY 335023

AA.