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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

- → Filing period: September 1 November 1
- → Filing Fee: \$50.00
- -> Penalty: Additional \$25.00 fee if form is not filed by December 1.

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1. Entity ID Number	2. Exact name of the Limited Liability Company					
00162047	Piscopio Electric LCC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
238210	Electrical Contractor					
5. State of Formation						
<u></u> <u></u>				······································	_	
6. Principal Office Address			City	State	Zıp	
576 indent	57 Linden Lane Linden Lane			RI	02817	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Anthony Piscopic			City West Greenwich State I Zip 02817			
Street Address 57 Linden Lanc			City West Greanwich	State I	Zip 02817	
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	Zıp	City	State	Zıp	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zıp	
Check the box to indicate an attachment						
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 Anthony Niscopio Signature of Authorized Person Date 2/23/18						
Signature of Authorized Person						
	· · <u>C</u>		 			

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

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4 SFORM 632 - Revised: 08/2016