RI SOS Filing Number: 201859778890 Date: 3/6/2018 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

STARTS

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					
148757	Moondance Star, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
113990		1	()a. //a /			
5. State of Formation	1 50	alling (New TCF			
Rhode Island		•				
6. Principal Office Address			City	State	Zip	
Post Office Box 99			Cold Spring Harbor	NY	11724	
7. Mailing Address of Limited Lia	ability Compar	ny and Name or T	itle of Contact Person		·- · · · · · · · · · · · · · · · · · ·	
Contact Name National Registered Agents, Inc			Contact Title			
Street Address 450 Vets Memorial Hwy, Suite 7A			City East Providence	State RI	^{Zip} 02914	
8. List ALL managers (names a	nd addresses	of the Limited Li	ability Company, IF APPLICABLE	- DO NOT LIST I	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	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 Isla	nd. This informa	ation is currently of	record with the Department of State.	Changes require film	ng Form 642.	
Under penalty of perjury, I dec statements, and that all stater			amined this report, including a ue and correct.	any accompanyin	g schedules and	
Name of Authorized Persen				Date	Date	
Richard Torrenzario				02-27-2018		
Signature of Authorized Person						
SIGN DOCUMENT HERE						
- 4	120				-	

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 WAR 0 6 2018

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