RI SOS Filing Number: 201860783520 Date: 3/22/2018 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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.

2018 MAR 22	RECEIVE SECRETARY OF SORPORATION
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1. Entity ID Number 1662598	2. Exact name of the Limited Liability Company WHITE HORSE VAPOR STORES LLC							
3. NAICS Code	4. Brief desc	4. Brief description of the character of business conducted in Rhode Island						
453998	RETAIL SALES OF ELECTRONIC CIGARETTES/PRODUCTS							
5. State of Formation	1							
RHODE ISLAND								
6. Principal Office Address			City	State	Zip			
1483 MINERAL SPRING AVENUE			NORTH PROVIDENCE	RI	02904			
7. Mailing Address of Limited Lia	bility Compan	y and Name or Title						
Contact Name DINO BACCARI			Contact Title MEMBER					
Street Address 1483 MINERAL SPRING AVENUE		City NORTH PROVIDENCE	State RI	^{Zip} 02904				
8. List ALL managers (names ar	nd addresses)	of the Limited Liab	oility Company, IF APPLICABLE - I	DO NOT LIST M	EMBERS			
Manager Name			Manager Name					
Street Address			Street Address					
City	State	Zip	City	State	Zip			
Manager Name			Manager Name					
Street Address			Street Address					
City	State	Zıp	City	State	Zip			
Check the box to indicate an attachment								
9. Resident Agent in Rhode Islar	nd. This informa	ition is currently of rec	cord with the Department of State. Cha	anges require filing	Form 642.			
Under penalty of perjury, I dec statements, and that all statem			mined this report, including any and correct.	accompanying	schedules and			
Name of Authorized Person				Date				
DINO BACEARI				03/22/2018				
Signature of Authorized Person		SIGN DO	OCUMENT HERE	_1				

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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