RI SOS Filing Number: 201863605270 Date: 5/4/2018 11:17:00 AM

State of Rhode Island and Providence Plantations	RECEI CRETARY ORPORATI
State of Rhode Island and Providence Plantations Department of State - Business Services Division	A ZONE
annual Report for the year:	SARE
imited Liability Company → Filing period: September 1 - November 1	Solve State (Solve)
TZ ENIDO DEDDO: SEDIEMBELT - NAVEMBELT	

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

			<u></u>			
1. Entity ID Number	2. Exact name of the Limited Liability Company					
00106567	EAST SIDE MART LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
445120	C-STORE					
5. State of Formation						
RI						
6. Principal Office Address			City	State_	Zip	
45 WENDRLL ST			PROV	RI	02909	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name PAUL SMITH			Contact Title OWNEK			
Street Address 422 L	reet Address 422 LLOYD AVE			State Z	Zip 02906	
B. 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 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 Date						
PAUL GON 1711 5-4-18						
Signature of Authorized Person						
FILED						
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MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov MAY 0 4 2018

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