

Annual Report for the year: <u>101</u> **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.

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Entity ID Number	2. Exact name of the Limited Liability Company					
001668520	Oahley Construction LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
236118						
5. State of Formation						
RI General Construction / Residential remodeling. 6. Principal Office Address City State Zip						
6. Principal Office Address			City	State	Zip	
9 howard st unit B			cranston	AI	02520	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Preston Leland			Contact Title	CO-CHIMEN		
Street Address 9 howard St unit B			city Clanston	State	Zip OZ976	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zıp	City	State	Zıp	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
	<u> </u>			Check the box to in	dicate 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 dec statements, and that all staten	lare and affiri ents contain	m that I have ex ed herein are tr	amined this report, includi	ng any accompanying	schedules and	
Name of Authorized Person				Date	Date	
Katelynn Leland				5-	5-22-18	
Signature of Authorized Person SIGN DOC 1985 N.E. RES.						

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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