RI SOS Filing Number: 201876145860 Date: 8/29/2018 4:00:00 PM



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

FILED

Annual Report for the year: 2018 **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.

	AUG 2 7 2018
BY_	Mala
	( )( //

1. Entity ID Number 149025	2. Exact name of the Limited Liability Company Patrick L. McKinney, Attorney at Law, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
541110	Law Office, Attorney					
5. State of Formation	1					
Rhode Island						
6. Principal Office Address			City	State	Zip	
24 Salt Pond Road, Suite C-4			Wakefield	RI	02879	
7. Mailing Address of Limited Lia	ability Company a	ind Name or Tit		•		
Contact Name Patrick L. McKinr	ney		Contact Title Manager			
Street Address 24 Salt Pond Road, Suite C-4			City Wakefield	State RI	<sup>Zip</sup> 02879	
8. List ALL managers (names a	nd addresses) of	the Limited Lia		BLE - DO NOT LIST I	MEMBERS	
Manager Name Patrick L. McKinney			Manager Name None			
Street Address 24 Salt Pond Road, Suite C-4			Street Address			
City Wakefield	State RI	Zip 02879	City	State	Zip	
Manager Name None			Manager Name None			
Street Address			Street Address			
City	State	Zıp	City	State	Zip	
· <del>-</del>	<u>l</u>	<u> </u>	<u> </u>	Check the box to i	ndicate an attachment	
9. Resident Agent in Rhode Isla	nd. This information	n is currently of re	cord with the Department of St	ate. Changes require filir	ng Form 642.	
Under penalty of perjury, I dec statements, and that all stater				ng any accompanyin	g schedules and	
Name of Authorized Person Patrick L. McKiriney						
Patrick L. McKinney					-l'10	
Signature of Authorized Person	4	SIGN D	OCUMENT HERE			

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov