RI SOS Filing Number: 201877107380 Date: 9/10/2018 4:00:00 PM



State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

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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.

Entity ID Number 2. Exact name of the Limited Liability Company					
568487	WEAR YOUR MUSIC LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
423940	eCOMMERCE & WHOLESALE OF GUITAR STRING BRACELETS AND OTHER MUSIC RELATED				
5. State of Formation	JEWELRY AND MERCHANDISE				
RHODE ISLAND					
6. Principal Office Address			City	State	Zıp
30 FOREST STREET			PROVIDENCE	RI	02906
7 Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name HANNAH GARRISON			Contact Title		
Street Address 30 FOREST STREET			City PROVIDENCE	State RI	<sup>Zip</sup> 02906
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name HANNAH GARRISON			Manager Name		
Street Address 30 FOREST STREET			Street Address		
City PROVIDENCE	State RI	<sup>Zip</sup> 02906	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 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 O 2 4 10					
HANNAH GARRISON 8/27/18					
Signature of Authorized Person SIGN DOCUMENT 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

FORM 632 - Revised: 10/2017