



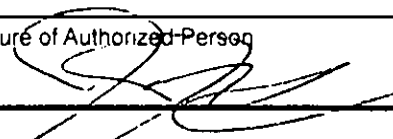
State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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.

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 CORPORATION DIV.
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1. Entity ID Number 1093381		2. Exact name of the Limited Liability Company TARFU FISHERIES, LLC			
3. NAICS Code 441222		4. Brief description of the character of business conducted in Rhode Island ACQUISITION, OWNERSHIP, REPAIRS, SERVICE, AND SALES OF BOATS, AND ANY ACCESSORY USES RELATED THERETO.			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 13 ISLAND AVENUE			City PORTSMOUTH	State RI	Zip 02871
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name JEAN J. LECOMTE			Contact Title MEMBER		
Street Address 13 ISLAND AVENUE			City PORTSMOUTH	State RI	Zip 02871
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name N/A			Manager Name N/A		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name N/A			Manager Name N/A		
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.					
<i>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.</i>					
Name of Authorized Person JEAN J. LECOMTE, MEMBER				Date 9/10/18	
Signature of Authorized Person  JEAN J. LECOMTE, MEMBER					

MAIL TO:

Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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FILED

SEP 12, 2018

BY 