

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

SECRETARY OF STATE CORPORATIONS DIV... STATE STA

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.

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1. Entity ID Number 1671192	1	2. Exact name of the Limited Liability Company				
		BLACKWOOD AMPLIFICATION, LLC				
3. NAIĆS Code	4. Brief de	Brief description of the character of business conducted in Rhode Island				
999999	AMPLIFIE	AMPLIFIER REPAIRS AND BUILDING GUITAR AMPLIFIERS				
5. State of Formation						
RHODE ISLAND						
6. Principal Office Address			City	State	Zip	
2 MANFREDI DRIVE			WESTERLY	RI	02891	
7. Mailing Address of Limited	d Liability Compa	any and Name or	Title of Contact Person	1		
Contact Name JAMI F. BLACKWOOD			Contact Title	Contact Title		
Street Address 2 MANFREDI DRIVE			City WESTERLY	State RI	^{Zip} 02891	
8. List ALL managers (name	es and addresse	s) of the Limited	Liability Company, IF APPLICAB	BLE - DO NOT LIST I	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zıp	
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 statements, and that all sta			examined this report, including true and correct.	g any accompanyin	g schedules and	
Name of Authorized Person				Date	111/2	
JAMI F. BLACKWOOD 9/19/18					14 18	
Signature of Authorized Pers		S:GI	N 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 FILED

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