

State of Rhode Island and Providence Plantations

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

FILED

SEP 2 6 2018

1 7 1 1

## 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				
972463	Tree of Life, LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
811411	LANDSCAPI	NG			
5. State of Formation	1				
Rhode Island					
6. Principal Office Address	•		City	State	Zip
34 Chicory Larie			Cranston	RI	02921
7 Mailing Address of Limited Lia	bility Company	and Name or Titl			
Contact Name John S. Corvese			Contact Title Member		
Street Address 34 Chicory Lane			City Cranston	State RI	<sup>Zıp</sup> 02921
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zıp
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zıp	City	State	Zip
		<u>-</u> -		Check the box to it	ndicate an attachment
9. Resident Agent in Rhode Islan	nd. This informati	on is currently of re	cord with the Department of Sta	ite. Changes require filin	g Form \$42.
Under penalty of perjury, I dec statements, and that all staten				g any accompanyin	g schedules and
Name of Authorized Person				Date	ŗ
John S. Corvese				9//8//	18
Signature of Authorized Person HON JOHOLE ET J. HERRE					

MÁIL TO:

**Division of Business Services** 

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

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