



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

**FILED**

OCT 01 2018

Annual Report for the year: 2018  
Limited Liability Company

BY 2176

- Filing period: September 1 - November 1  
→ Filing Fee: \$50.00  
→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number <u>1667126</u>		2. Exact name of the Limited Liability Company <u>All-Brand New England LLC</u>			
3. NAICS Code <u>722310</u>		4. Brief description of the character of business conducted in Rhode Island <u>Distribute food and paper goods to the nursery school, child and adult daycare market place</u>			
5. State of Formation <u>MA</u>					
6. Principal Office Address <u>250 Canal St</u>		City <u>Lawrence</u>		State <u>MA</u>	Zip <u>01840</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>Greg Miller</u>		Contact Title <u>Partner / Owner</u>			
Street Address <u>250 Canal St</u>		City <u>Lawrence</u>		State <u>MA</u>	Zip <u>01840</u>
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name <u>Greg Miller</u>		Manager Name <u>John Richard</u>			
Street Address <u>250 Canal St</u>		Street Address <u>250 Canal St</u>			
City <u>Lawrence</u>	State <u>MA</u>	Zip <u>01840</u>	City <u>Lawrence</u>	State <u>MA</u>	Zip <u>01840</u>
Manager Name <u>Paul Robbat</u>		Manager Name			
Street Address <u>250 Canal St</u>		Street Address			
City <u>Lawrence</u>	State <u>MA</u>	Zip <u>01840</u>	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
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 <u>Greg Miller</u>				Date <u>9/26/18</u>	
Signature of Authorized Person <u>Greg Miller</u>				SIGNATURE	

**MAIL TO:**

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