State of Department	of Rhode Island and Prov	ridence Planta	tions
	artment of State -	Business	Services Division
•	ort for the year:	2018	

→ Filing period: September 1 - November 1

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

						1 WHII: PRE		
1. Entity ID Number		2. Exact name of the Limited Liability Company						
001032315	LEE	LEE BARRETT ALLEN LLC						
3. NAICS Code	4. Brief descrip	Brief description of the character of business conducted in Rhode Island						
1-54141D	SPECII	SPECIAL DESIGN						
5. State of Formation	7							
RI								
6. Principal Office Address	•		City	State	Zip	1		
50 MULLIN HILL RD		Little Comp	ton RI	02837				
7. Mailing Address of Limited L	iability Company	and Name or Title	e of Contact Person]		
Contact Name LEE BARRETT ALLEN			Contact Title Principle]		
Street Address BO MULLIN HILL RD		City Little Compi	ton State RI	^{zw} 02837]			
8. List ALL managers (names	and addresses) o	f the Limited Liab	ility Company, IF APPLICABL	E - DO NOT LIST I		7		
Manager Name			Manager Name					
Street Address			Street Address					
City	State	Zip	City	State	Złp	7		
Manager Name			Manager Name			1		
Street Address			Street Address			7		
City	State	Zip	City	State	Zlp	1 28		
· · · · · · · · · · · · · · · · · · ·	- 			Check the box to it	ndicate an attachment	018 OCT -9 PM		
9. Resident Agent in Rhode Isla	and. This information	n is currently of rec	cord with the Department of State.	. Changes require filin	g Form 642.	2818 OCT		
Under penalty of perjury, I de statements, and that all state				any accompanyin	g schedules and] - 9		
Name of Authorized Person				Date	_			
UBBORDE	3e). 1	EE BAR	LETT BORDEN	1 9.18	5.18	₽.		
Signature of Authorized Person		<u> </u>		•				
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						- •		

MAJL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ni.gov

FILED

OCT 09 2018

FORM 632 - Revised: 10/2017