) s	State of Rhode Island and Providence Plantations Department of State - Business Services Div	/ision
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		State of Rhode Island and Providence Plantations Department of State - Business Services Div

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.

	7	4 4 4 4 4				-
1. Entity ID Number			Liability Company	110		
001032315	LEE	BARK	CETT ALLEN	LLC		_
3. NAICS Code	1	- · -	aracter of business conducted	d in Rhode Island		
54141U	SPECI	AL DE	516N			
5. State of Formation		·				
RT						
6. Principal Office Address			City	State	Zip	7
50 MULLIN	HILL F	PD	Little Con	npton RI	02837	
7. Mailing Address of Limited	Liability Compan	y and Name or	Title of Contact Person			
Contact Name LEE BAR	RETT A	LLEN	Contact Title Privi	Yrinciple		
Street Address MULLIN HILL RD			City Little Com	ofm State RI	^{zip} 02837	
8. List ALL managers (names	and addresses)	of the Limited L	iability Company, IF APPLICA	BLE - DO NOT LIST N	IEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zıp	City	State	Zip	1
Manager Name		<u></u>	Manager Name	Managor Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	−
				Check the box to in	 ndicate an attachment	261
9 Resident Agent in Rhode Is	land. This informa	tion is currently of	record with the Department of S	tate. Changes require filin	g Form 642.	1 은
Under penalty of perjury, I d	eclare and affin	m that I have e	xamined this report, includi			7 -
statements, and that all state Name of Authorized Person	ements contain	क्य तहरकात श्री है	rue and correct.	Date		9 ا
BEO	2050	. LEE	BARRET BOKE	00 16	5.18	70
Signature of Authorized Person	n new.		DOCUMENT HERE			22

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

OCT 09 2018

FORM 632 - Revised: 10/2017