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

Annual Report for the year: 2018

→ Filing period: January 1 - March 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by April 1.

OCT 1 0 2018

BY 38997

Entity ID Number	2. Exact name of the Corporation								
001664729	AM KING CONSTRUCTION COMPANY, LLC								
3. Principal Office Address				City			State	Zip	
1610 EAST MOREHEAD, SUITE 200				CHARL	OTTE		NC	28207	
4. NAICS Code									
236200									
5. State of Incorporation	1								
sc	BUILDING	20							
7 List ALL officers (names and ad		<u> </u>			Che	ck the bo	x to indica	te an attachment	
President Name				Vice-President Name					
BRIAN KING									
Street Address				Street Address					
1610 E MOREHEAD, STE 200									
City	State	Zip		City		State		Zip	
CHARLOTTE	NC 28207								
					Treasurer Name				
I Land line									
Street Address				Street Address					
(Men aville	State	Zip	1911	CITY		State		Zip	
8. List ALL directors (names and addresses) Check the box to indicate an attachment									
Director Name				Director Name					
Street Address				Street Address					
City	State	Zip	<u> </u>	City		State		Zip	
Director Name					Director Name				
Street Address				Street Address					
City	State	tata Zio			City State			Zip	
City	State	Zip		City		Sidle		~~	
Shares Authorized	I	Т	10. Shares Issued	I	Ch	eck the ho	ox to indica	ele an attachment	
							PAR VALUE		
			NUMBER OF SHARES		COMMON		1		
Changes require an additional			 .						
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or									
trustee, this report must be executed on behalf of the corporation by the receiver or trustee.									
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.							Date		
Name of Authorized Representative						1	Date		
Signature of Authorized Representative									
BRIAN KING									
DYTMI VIIIG									

MAIL TO:

Division of Business Services

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

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