RI SOS Filing Number: 201880040500 Date: 10/23/2018 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

FILED

OCT 2 3 2018

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.

1. Entity ID Number	· ·	2. Exact name of the Limited Liability Company Blowouts, LLC				
928732	Blow					
3. NAICS Code	4. Brief de	4. Brief description of the character of business conducted in Rhode Island				
812112	Hair salon					
5. State of Formation						
Rhode Island						
6. Principal Office Address	<u></u>	·	City	State	Zip	
10 Acorn Street			Cumberland	RI	02864	
7. Mailing Address of Limited L	iability Compa	any and Name o			<u> </u>	
Contact Name Carrie Dodge			Contact Title Member	Contact Title Member		
Street Address 10 Acorn Street			City Cumberland	State RI	Zip 02864	
	and addresse	s) of the Limited	Liability Company, IF APPLICAE	BLE - DO NOT LIST	MEMBERS	
Manager Name NONE			Manager Name NONE	Manager Name NONE		
Street Address			Street Address	Street Address		
City	· . State	Zip	City	State	Zip	
Manager Name NONE			Manager Name NONE	Manager Name NONE		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
-				Check the box to	indicate an attachment	
9. Resident Agent in Rhode Isl	and. This inforr	nation is currently	of record with the Department of Sta	te. Changes require fil	ing Form 642.	
Under penalty of perjury, I de statements, and that all state			examined this report, including true and correct.	g any accompanyi	ng schedules and	
Name of Authorized Person				Date	Date	
Carrie Dodge				10/14	10/14/18	
Signature of Authorized Respr	911 O A	Sid	MOCUMENT HERE	/		
	· -	NU	X			

MAIL TO:

Division of Business Services

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

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