

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 <b>001049253</b>		2. Exact name of the Limited Liability Company <b>WISP AND WANDER LLC</b>			
3. NAICS Code <b>711510</b>		4. Brief description of the character of business conducted in Rhode Island <b>ARTS AND DESIGN</b>			
5. State of Formation <b>Rhode Island</b>					
6. Principal Office Address <b>371 grand ave apt 2r</b>		City <b>pawtucket</b>		State <b>ri</b>	Zip <b>02861</b>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <b>daniel torrente</b>			Contact Title		
Street Address <b>371 grand ave apt 2r</b>			City <b>pawtucket</b>	State <b>ri</b>	Zip <b>02861</b>
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	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.					
<i>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.</i>					
Name of Authorized Person <b>daniel torrente</b>				Date <b>10/15/18</b>	
Signature of Authorized Person <b>DANIEL TORRENTE</b>					

## 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** *dv*

OCT 22 2018

BY *204*