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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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2018 OCT 31 PM 12: 36

Annual Report for the year: 2018
Limited Liability Company

- → Filing period. September 1 November 1
- → Filing Fee S50 00
- → Penalty. Additional \$25,00 fee if form is not filed by December 1

1 Entity ID Number 171700		2 Exact name of the Limited Liability Company keithjochimphoto, LLC				
3 NAICS Code	4 Brief des	4. Brief description of the character of business conducted in Rhode Island				
812990	Photogra	Photography				
5. State of Formation						
Rhode Island						
6 Principal Office Address			City	State	Zip	
289 Merrymount Drive			Warwick	RI	02888	
7 Mailing Address of Limited	t Lab lity Compa	any and Name o		•		
Contact Name Keith Jochim			Contact Title Member			
Street Address 289 Merrymount Drive			Cily Warwick	State RI	^{Zip} 02888	
8 List ALL managers (name	es and addresses	s) of the L mited	Liability Company, IF APPLICA	BLE - DO NOT LIST I	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
C ty	State	7 p	City	State	Z:o	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	<u> </u>		J	Check the box to i	ndicate an attachment	
9 Resident Agent in Rhode	Island This inform	nation is currently	of record with the Department of S	tate. Changes require filir	ng Form 642	
Under penalty of perjury, I statements, and that all sta			examined this report, includi true and correct.	ng any accompanyin	g schedules and	
Name of Authorized Person		·- · · · · · · · · · · · · · · · · · ·		Date	1.5	
Keith Jochim, Member		,		10/2	3/18	
Signature of Authorized Pers	son La	thsign	SOCUMAN HISRE	,		

MAIL TO:

Division of Business Services

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

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

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FORM 632 - Revised: 08/2017