RI SOS Filing Number: 201880625130 Date: 10/31/2018 4:00:00 PM

State of Rhode Island and Providence Plantations Department of State - Business Services Division	
Annual Report for the year:	8 100 € 2
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 163429		2. Exact name of the Limited Liability Company MWR, LLC					
3. NAICS Code 3. NAICS Code 5. State of Formation RI	4. Brief de	Brief description of the character of business conducted in Rhode Island MANUFACTURE AND SALES OF JEWELRY AND ACCESSORIES					
6. Principal Office Address			City	State	Zip		
229 MARTIN STREET			EAST PROVIDENCE	RI	02914		
7. Mailing Address of Limited	Liability Compa	iny and Name o	r Title of Contact Person	•			
Contact Name MAXIMILIANO VILLARREAL			Contact Title ACCOUNT MANAGER				
Street Address 229 MARTIN STREET			City EAST PROVIDENCE	State RI	^{Zip} 02914		
8. List ALL managers (names	and addresse	s) of the Limited	Liability Company, IF APPLICABLE	DO NOT LIST	MEMBERS		
Manager Name			Manager Name				
Street Address			Street Address				
City	· ·	, ·	<u>'</u>	State	Zıp		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zıp	City	State	Zip		
}-···-			C	heck the box to	indicate an attachment		
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642							
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.							
Name of Authorized Person				Date			
MAXIMILIANO VILLARREAL			10/28/18				
Signature of Authorized Person SIGN DOCUMENT HERE							

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 3 1 2018

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FORM 632 - Revised: 10/2017