

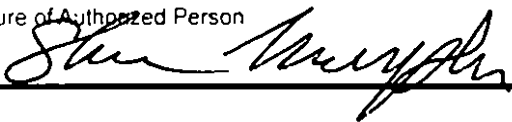


State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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 542122		2. Exact name of the Limited Liability Company Sig's Place, LLC			
3. NAICS Code 445299		4. Brief description of the character of business conducted in Rhode Island Restaurant			
5. State of Formation RI					
6. Principal Office Address 1151 Aquidneck Avenue		City Middletown		State RI	Zip 02840
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Shawn Margolis			Contact Title Manager		
Street Address 1151 Aquidneck Avenue			City Middletown		State RI
			Zip 02842		
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Shawn Margolis			Manager Name		
Street Address 1151 Aquidneck Ave.			Street Address		
City Middletown	State RI	Zip 02842	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.					
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 Shawn Margolis				Date	
Signature of Authorized Person 					

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

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