	State of Rhode Island and Providence Plantations				
	State of Rhode Island and Providence Plantations  Department of State - Business Services Divisio	ľ			

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>001677327</b>		e of the Limited Li	ability Company ATER FILTRAT	ION COMPA	NY, LLC		
3. NAICS Code	Brief description of the character of business conducted in Rhode Island						
999999	Water Filtration Systems						
5. State of Formation					ı		
Rhode Island							
6. Principal Office Address	· · · · · · · · · · · · · · · · · · ·		City	State	Zıp		
3 Chamberlain Street			Johnston	RI	02919		
7. Mailing Address of Limited Lia	bility Company	and Name or Titl					
Contact Name Steven A. Moret	ti, Esq.		Contact Title Registered Agent				
Street Address 1140 Reservoir	Avenue		City Cranston	State RI	<sup>Zip</sup> 02920		
8 List ALL managers (names ar	nd addresses)	of the Limited Liab	oility Company, IF APPLICA	BLE - <b>do not list m</b>	EMBERS		
Manager Name Kathleen Barat	tini		Manager Name				
Street Address 3 Chamberlain 5	Street		Street Address				
City Johnston	State RI	<sup>Z<sub>IP</sub></sup> 02919	City	State	Zıp		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Check the box to indicate an attachment							
9. Resident Agent in Rhode Islan	id. This informat	ion is currently of re	cord with the Department of St	ate. Changes require filing	Form 642.		
Under penalty of perjury, I dec statements, and that all statem				ng any accompanying	schedules and		
Name of Authorized Person Date							
Kathleen Barattini	10/18	10/18/18					
Signature of Authorized Person	YL)	SIGN DO	DOUMENT HERE				

**FILED** 

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov NOV 1 3 2018 KM

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