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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

FILED

NOV 1 4 2018

Annual Report for the year: <u>2018</u> 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.

Entity ID Number 2. Exact name of the Limited Liability Company					
حسب أبيا					
01662170	Gypsea hiving				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
424210	make seed skin care and home goods.				
5. State of Formation					
RI RI					
6. Principal Office Address			City	State	Zip
35 Requot Kd			Pawtucket	RI	02860
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Kassyndra Pernotti			Contact Title		
Street Address 71 Messenger St. Apt 970			Plainville	State MA	^{Zip} 02762
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	Zıp	City	State	Zip
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 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					
Kassundra Penotti				1431/18	
Signature of Authorized Person					
Chassurd Sun tt. 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