s s	itate of Rhode Island and Pr Office of the Secret		Fee: \$50.00
	Division Of Busines 148 W. River S Providence RI 029	Street	
HOPE	(401) 222-30	)40	
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability con in thirty (30) days after the time pres penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2018</u>		
1. ID No. <u>000690401</u>			
2. Exact Name of the Limited Liability Company Sophia's Tuscan Grille, LLC			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
4. Brief Description of th	e Character of the Business Whic	h is Actually Conducted in	Rhode Island
FULL SERVICE REST	AURANT		
5. Principal Office Addre	SS		
	WARWICK AVENUE RWICK S	tate: <u>RI</u> Zip: <u>02889</u> C	country: <u>USA</u>
6. Mailing Address of Li	mited Liability Company and Nam	e or Title of Contact Perso	n:
Contact Name: CHRIS F	PALIOS Contact Title:		
	<u>WARWICK AVENUE</u> <u>WICK</u> Sta	ate: <u>RI</u> Zip: <u>02889</u> C	ountry: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, 2	Zip Code, Country
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER			

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

CHRISTOPHER PALIOS 1729 WARWICK AVENUE WARWICK , RI 02889

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

## Signed this 19 Day of November, 2018 at 10:24:52 AM by the authorized person. This

electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

## By CHRISTOPHER PALIOS

Signature of Authorized Person

Form No. 632 Revised 09/07

 $\textcircled{\mbox{\sc only}}$  2007 - 2018 State of Rhode Island and Providence Plantations All Rights Reserved