

Annual Report for the year: 2018
Limited Liability Company

2018 HOV 26 AM 8: 58

RECEIVED

R.I. DEPT. OF STATE P

BUS SVCS DIV

→ 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 137847		2. Exact name of the Limited Liability Company Alexon Construction LLC				
3. NAICS Code 236118	I	Brief description of the character of business conducted in Rhode Island residential and commercial renovations				
5. State of Formation ri						
6. Principal Office Address 96 Birchwood Drive			City Wakefield	State RI	Zip 02879	
7. Mailing Address of Limited	Liability Compa	any and Name o				
Contact Name John Villanis			Contact Title Owner	Contact Title Owner		
Street Address 96 Birchwood Drive			City Wakefield	State RI	^{Zıp} 02879	
8. List ALL managers (names	and addresse	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zıp	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
-	•			Check the box to	indicate an attachment	
9. Resident Agent in Rhode Is	land. This inform	nation is currently	of record with the Department of Si	tate. Changes require fili	ing Form 642	
Under penalty of perjury, I o statements, and that all stat			examined this report, includi true and correct.	ng any accompanyii	ng schedules and	
Name of Authorized Person				Date	Date	
Cathryn J. Morgan				11/26/2	11/26/2018	
Signature of Authorized Person	on	- Karana	N DOCUMENT HERE			
		1				

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

NOV 26 2018

BY OUBDLO