

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.

حع	ω	
2018 0	CORRE	۸
DEC (RECEMP ORAR	. '
20	12.V	
PH 12:	TO DE STATE	- ,
2: 22	STATE	

-							
1. Entity ID Number	2. Exact name of the Limited Liability Company The Fenton Group, LLC						
130815	Ine r	enton G	roup, LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island Advertising and public relations						
812290							
5. State of Formation	1						
Rhode Island							
6. Principal Office Address			City	State	Zip		
44 Weybosset Street			Providence	RI	02903		
7. Mailing Address of Limited Lia	ability Compa	any and Name o	r Title of Contact Person				
Contact Name Joshua Fenton			Contact Title	Contact Title			
Street Address 44 Weybosset Street			City Providence	State RI	Zip 02903		
8, List ALL managers (names a	nd addresse	s) of the Limited	Liability Company, IF APPLICAL	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				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
	<u> </u>			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 dec statements, and that all states			examined this report, including true and correct.	g any accompanyir	ng schedules and		
Name of Authorized Person Date							
Melissa Dekroon							
Signature of Authorized Person		eic.	N DOCHMENT HERE				
Melissa Det 2000							
				_			

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov 17:2 FILED
DEC 2 0 2018

FORM 632 - Revised: 10/2017