Department of State - Business Services Division Annual Report for the year:					SECRETARY CORPORATION OF THE CORPORATION OF THE COR
→ Penalty: Additional \$25.00	0 fee if form is	s not filed by Decer	mber 1.		
(4 E 17 18 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Ta = .				<u>3</u> . √ <u>₹</u>
1. Entity ID Number	2. Exact name of the Limited Liability Company				
001675349	401 clean 11c				
3. NAICS Code 561720	4. Brief description of the character of business conducted in Rhode Island				
5. State of Formation RI	Crec	ining			
6. Principal Office Address			City	State	Zip
114 Longdale	2 Farm	1 Road	Cumperiand	RI	02864
7. Mailing Address of Limited Li	ability Compa	ny and Name or Title			
Contact Name Jaryd Fontes			Contact Title OWNER		
Street Address 114 Lonsdale Farm Thogd			city	State	P03809
8. List ALL managers (names a	ind addresses) of the Limited Liab	ility Company, IF APPLICABLE -	DO NOT LIST N	
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
					ndicate an attachment
			cord with the Department of State. Ch		
Under penalty of perjury, I de statements, and that all state	clare and affi ments contai	rm that I have exam ned herein are true	nined this report, including any and correct.	/ accompanying	schedules and
Name of Authorized Person Sarya Fontes				Date 12/20/18	
Signature of Authorized Person					<u> </u>

MAIL TO:

Division of Business Services

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

State of Rhode Island and Providence Plantations

Phone: (401) 222-3040 Website: www.sos.ri.gov

DEC 2 0 2018 1:34 BY_Cn_762PX