

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.

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| 1, Entity ID Number | 2. Exact nan | 2. Exact name of the Limited Liability Company | | | | | |
|--|------------------------|--|--|----------------------------|-----------------------------|--|--|
| 907968 | Teamw | Teamwork, LLC | | | | | |
| 3. NAICS Code | | Brief description of the character of business conducted in Rhode Island | | | | | |
| 531110 | Own and Ma | anage Real Prop | erty | | | | |
| 5. State of Formation | | | | | | | |
| Rhode Island | | | | | | | |
| 6. Principal Office Address | • | | City | State | Zip | | |
| 40 Meadow Road | | | Seekonk | MA | 02771 | | |
| 7. Mailing Address of Limit | ed Liability Compan | y and Name or Ti | tle of Contact Person | · | | | |
| Contact Name George Murphy, III | | | Contact Title Operating Manager | | | | |
| Street Address 40 Meadow Road | | | City Seekonk | State MA | ^{Ζιρ} 02771 | | |
| _ | | of the Limited Lia | ibility Company. IF APPLIC | ABLE - DO NOT LIS T | MEMBERS | | |
| Manager Name George Murphy, III | | | Manager Name | | | | |
| Street Address 40 Meadow Road | | | Street Address | | | | |
| City Seekonk | State MA | Zip 02771 | 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 | e Island. This informa | t:on is currently of re | ecord with the Department of S | tate. Changes require fili | ng Form 642 | | |
| Under penalty of perjury, statements, and that all s | | | amined this report, including and correct. | ing any accompanyir | ng schedules and | | |
| Name of Authorized Person | n | | - | Date | . / | | |
| George Murphy, III | Lleon | Nuppl | | 10/8/ | 1/8 | | |
| Signature of Authorized Pe | erson | | | | | | |
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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

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FORM 632 - Revised: 10/2017