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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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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4,	

1. Entity ID Number 000907959		2. Exact name of the Limited Liability Company McQueeny, LLC				
3. NAICS Code 3.015 5 State of Formation RI		Brief description of the character of business conducted in Rhode Island Construction services and for all other lawful purposes.				
6. Principal Office Address P.O.Box 1472			City Block Island	State Ri	Zip 02807	
7. Mailing Address of Limited		ny and Name or Ti				
Contact Name Alicja K. McQueeny			Contact Title Managing Member			
Street Address P.O.Box 1472			City Block Island	State RI	Zip 02807	
) of the Limited Lia	bility Company, IF APPLICAB	LE - DO NOT LIST	MEMBERS	
Manager Name Stephen Michael McQueeny		Manager Name Alicja K. McQueeny				
Street Address P.O.Box 1472		Street Address P.O.Box 1472				
City Block Island	State RI	^{Zip} 02807	City Block Island	State RI	Z _{ip} 02807	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zip	
	<u></u>	·····		Check the box to i	indicate an attachment	
9. Resident Agent in Rhode Is	sland. This informa	ation is currently of re	ecord with the Department of Stat	te. Changes require filir	ng Form 642.	
	leclare and affir	m that I have exa	mined this report, including			
Name of Authorized Person			Date	Date		
Elliot Taubman, Esq.			12/21/2	12/21/2018		
Signature of Authorized Person	on and	SIGME	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

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FORM 632 - Revised: 10/2017