RI SOS Filing Number: 201985052660 Date: 1/23/2019 4:17:00 PM



State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

RECEIVED SECRETARY OF STATE CORPORATIONS DIV

2019 JAN 23 PM 4:16

## Annual Report for the year: 2017**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.

Entity ID Number	2. Exact name of the Limited Liability Company					
001660492	Dr. Ashley & Co., LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
541690	Concept development					
5. State of Formation						
RI						
6. Principal Office Address			City	State	Zip	
45 Hidden Street, #C			Providence	. RI	02906	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Adam Eltorai			Contact Title Manager			
Street Address 7 North Main Street, #1433			City Old Saybrook	State CT	<sup>Zip</sup> 06475	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name Adam Eltorai			Manager Name			
Street Address 7 North Main Street, #1433			Street Address			
City Old Saybrook	State CT	<sup>Zip</sup> 06475	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
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 declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.						
Name of Authorized Person				Date	Date	
Adam Eltorai				Jan 22, 201	Jan 22, 2019	
Signature of Authorized Person  Adam Elloral  Resmittered (Jan 22, 2018)  SIGN DOCUMENT HERE						

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

JAN 23 2019

BY Cu 4F64Z

FORM 632 - Revised: 10/2017