



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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 SECRETARY OF STATE
 CORPORATIONS DIV
 2019 JAN 24 PM 12:20

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.

1. Entity ID Number 000794186		2. Exact name of the Limited Liability Company Cores Unlimited LLC			
3. NAICS Code 4-424110		4. Brief description of the character of business conducted in Rhode Island Buying & Selling			
5. State of Formation Rhode Island					
6. Principal Office Address 840 North Wilson Road		City Lowgap	State NC	Zip 27024	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name PHILLIP HARRISON		Contact Title Manager			
Street Address 840 North Wilson Road		City Lowgap	State NC	Zip 27024	
8 List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
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 PHILLIP HARRISON				Date 09/17/2018	
Signature of Authorized Person 		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 24 2019

BY 05603

FORM 632 - Revised: 08/2016

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