S	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
HOPE	Division Of Business 148 W. River S Providence RI 0290 (401) 222-304	reet 14-2615	
Limited Liability Com	pany		
Annual Report Filing Period: September 1 - November 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2018			
1. ID No. <u>001659098</u>			
2. Exact Name of the Limited Liability Company Hair Restoration Setup llc			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.			
<u>999999</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
PLAN TO ASSIST DOCTORS IN SETTING UP HAIR RESTORATION CLINICS FROM THE GROUND UP			
5. Principal Office Addre	SS		
	TNAM PIKE, SUITE J, #234 IFIELD	State: <u>RI</u> Zip: <u>02917</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name:Contact Title:No. and Street:400 PUTNAM PIKE, SUITE J, #234City or Town:SMITHFIELDSMITHFIELDState: RIZip:02917Country: US			
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State	, Zip Code, Country

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

CLARK TANNER 15 HIGGINS STREET, UNIT 116 SMITHFIELD, RI 02917

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 29 Day of January, 2019 at 3:22:58 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By <u>CLARK TANNER</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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