

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year:

2019 MAR -4 PM 3: 25

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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Entity ID Number	2. Exact name of the Limited Liability Company					
1663928	HOG 1	sland	Studios, L	LC		
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
611519	- teac	him d		Tombución art work		
5. State of Formation		7111y q	producing art work.			
R.I.						
6. Principal Office Address			City	State	Zip	
loo Jenkins St.			Providence	RI	02906	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Lenny Long			Contact Title			
Street Address LOO Jenkins St			City Prov	State	Zip 2906	
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						
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 de statements, and that all state			mined this report, including an and correct.	y accompanyin	g schedules and	
Name of Authorized Person				Date 1	1 1-	
Feonard J. LONG 3,4,					1,19	
Signature of Authorized Person						
Ilonard I.lone						

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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