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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the y Limited Liability Compa		2018			AM II: 3	
→ Filing period: September	-	er 1			₹ 77.60	
→ Filing Fee: \$50.00					3 < <u>4</u>	
→ Penalty: Additional \$25.00	fee if form is	not filed by De	cember 1.	_		
1. Entity ID Number	2. Exact na	ne of the Limited	Liability Company			
1338480	D4B BOUNCE HOUSE, LLC					
. NAICS Code 4. Brief description of the character of business conducted in Rhode Island						
DE 23578A	RENT	AL EQUIP	MENT FOR AMUS	EMENTS		
5. State of Formation		•		7104110		
RHODE ISLAND						
6. Principal Office Address			City	State	Zip	
143 WARNICK AVE # 182			WARWICK	RI	02889	
7. Mailing Address of Limited Lia	bility Compa	ny and Name or				
Contact Name MAYRA RAPOSO			Contact Title OWNE	Contact Title OWNER		
Street Address 1443 WARWICK AVE #182			City WARWICK	State	Zip o 2889	
8. List ALL managers (names a	nd addresses) of the Limited L	iability Company, IF APPLICABL			
Manager Name			Manager Name			
Street Address			Street Address	Street Address		
City	State	Zıp	City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address		· -	Street Address	Street Address		
City	State	Zip	City	State	Zip	
	1			Check the box to	indicate an attachment	
9. Resident Agent in Rhode Isla	nd. This inform	nation is currently o	of record with the Department of State	e. Changes require fil	ing Form 642.	
Under penalty of perjury, I de statements, and that all state			examined this report, including true and correct.	any accompanyi	ng schedules and	
Name of Authorized Person						
MAYRA RAPOSO					20190318	
Signature of Authorized Person	-	1)				
		MY	MC			
·				_		
MAIL TO:					MAD 1 9 2010	
Division of Business Services 148 W. River Street, Providence	Phodo Islan	4 02004 2645			MAK 10 ZUIS	
Phone: (401) 222-3040	, Anoue Islan	u UZ3U4-Z010		RΛ	MAR 18 2019 11	
Website: www.sos.ri.gov				ַוַט.		