

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

2019 MAR 20 PM 2: 53

Annual Report for the year: 20/6 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.

4	- '					
1. Entity ID Number	2. Exact name of the Limited Liability Company					
132085	Acme	ACME HOLDING LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
53/390	INVESTMENT					
5. State of Formation	7					
RI						
6. Principal Office Address			City	State	Zip	
140 BRELTON ROAD			Newroll	RI	02840	
7. Mailing Address of Limited L	iability Company a	and Name or Title	of Contact Person	•		
Contact Name WILLIAM LEATHERNAL			Contact Title NANAGING PARTILER			
Street Address 140 PRENTON Rd			City Vengory	State 21	Zip 02840	
8. List ALL managers (names	and addresses) of	the Limited Liab	ility Company, IF APPLICABLE -	DO NOT LIST M	EMBERS	
Manager Name William LETHERMAN			Manager Name			
Street Address 140 Brown 24			Street Address			
City Heaport	State	0 2840	City	State	Zip	
Manager Name)			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
			Ch	neck the box to in	ndicate an attachment	
			ord with the Department of State. Ch			
Under penalty of perjury, I d statements, and that all stat	leclare and affirm ements contained	that I have exar I herein are true	nined this report, including any and correct.	y accompanying	schedules and	
Name of Authorized Person ILLIAN LEATHERWAY Signature of Authorized Person Control of				3 · 20 · 19		
Signature of Authorized Perso	on Mi	faller.	w			
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MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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