

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

PLOSIVED CRETARY OF STATE CORPORATIONS DIV

2019 APR -3 AM 10: 18

Annual Report for the year: 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	2 Exact na	ime of the Limite	d Liability Company			
133639	10 Dr	<u>nove</u>	Stack Liga	re snox) LLC	
3. NAICS Code 453991	4. Brief des	scription of the ch	naracter of business conducted in	Rhode Island	Acussonulos	
5. State of Formation			.			
8 Principal Office Address			City	State	Zıp	
2003 SMIT	H ST		N. Providence	RI	07411	
Mailing Address of Limited	d Liability Compa	iny and Name or	Title of Contact Person		·	
1 Contact Name Dung Lovett			Contact Title	1		
Street Address 2003 SMITH ST			8. Providence	State 2-7	ZIP (7291)	
8. List ALL managers (name	es and addresses	s) of the Limited	Liability Company, IF APPLICABL	E - DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address ·			Street Address	Street Address		
Cit	State	Zrp	City	State	Zıp	
Manager Name		 -	Manager Name			
Street Address			Street Address	Street Address		
City	State	Zıp	City	State	Zip	
	I	 		Check the box to indicate an attachment		
9. Resident Agent in Rhode	Island, This inform	nation is currently o	of record with the Department of State	. Changes require fil	ing Form 642.	
Under penalty of perjury, I statements, and that all st			examined this report, including true and correct.	any accompanyi	ng schedules and	
Name of Authorized Person Douglas R Lowett III 43 2019						
Signature of Authorized Par					1	

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**

APR 0 3 2019

BY NEUEZ

FORM 632 - Revised: 10/201