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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

RECEIVED SECRETARY OF STATE CORPORATIONS CIV

2019 APR 10 PH 3: 41

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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1. Entity ID Number	2 Exact name of the Limited Liability Company						
1683839	Premie	r Constr	vetion a	and semoda	ling be	rvice LLC	
3. NAICS Code	Premier Construction and remodeling Service LUC 4. Brief description of the character of business conducted in Rhode Island						
236118	femodeling.						
5. State of Formation	Ferrior Circle						
f. 1.							
Principal Office Address	1		City		State	Zıp ,	
10 ambrose st.			North	Providence	P. J.	02904	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Flatt Ramos			Contact Title				
Street Address 10 ambione of.			North	Providence.	State	Zip 02404	
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	Zıp	City		State	Zıp	
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City		State	Zıp	
	<u> </u>	1	-1	Che	ck the box to inc	dicate 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 declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.							
Name of Authorized Person Date							
Elder Chamos.					04/10/19		
Signature of Authorized Person 3.							
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MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov APR 1 0 2019 3:41

FORM 632 - Revised: 10/2017