



Department of State - Business Services Division

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Annual Report for the year: 2014
Limited Liability Company

2019 MAY 20 PM 12:43

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- 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 000312002		2. Exact name of the Limited Liability Company L & L LLC			
3. NAICS Code 531190		4. Brief description of the character of business conducted in Rhode Island Lease land for business operations			
5. State of Formation RI					
6. Principal Office Address Waldens Way		City Block Island		State RI	Zip 02807
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Leone Leone		Contact Title Managing Member			
Street Address PO Box 562		City Block Island		State RI	Zip 02807
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 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 Elliot Tarbman, Esq.				Date 5/14/2019	
Signature of Authorized Person Elliot Tarbman				SIGN DOCUMENT HERE	

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

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