

2019 JUN -4 PH 2: 06

Annual Report for the year: 2018 **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.

Entity ID Number	2. Exact n	2. Exact name of the Limited Liability Company				
001677041	Powd	Powder Brand, LLC				
3. NAICS Code	4. Brief de	Brief description of the character of business conducted in Rhode Island				
423940	Jewelry, I	Bracelets				
5. State of Formation						
Rhode Island						
6. Principal Office Address			City	State	Zıp	
370 Commerce Park Road			North Kingstown	RI	02852	
7. Mailing Address of Limiter	•	any and Name o		<u> </u>		
Contact Name Taylor Kenney			Contact Title Vice President			
Street Address 370 Commerce Park Road			City North Kingstown	State RI	Zip 02852	
8. List ALL managers (name	es and addresse	s) of the Limited	Liability Company, IF APPLICABLE	- DO NOT LIST	MEMBERS	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zıp	
Check the box to indicate an attachment						
9. Resident Agent in Rhode	Island. This inform	nation is currently	of record with the Department of State.	Changes require filir	ng Form 642.	
Under penalty of perjury, I statements, and that all st			examined this report, including a true and correct.	ny accompanyin	g schedules and	
Name of Authorized Person				Date	Date	
Taylor Kenney				06/04/19		
Signature of Authorized Pers	son /	2				
		<i></i>				

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**

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FORM 632 - Revised: 10/2017