RI SOS Filing Number: 201995774370 Date: 6/7/2019 4:00:00 PM



State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

2019 JUN -7 PH 12: 14

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.

Entity ID Number     2. Exact name of the Limited Liability Company					
10+1971	Dro	olden's	Eitchen	ساس	
3. NAICS Code			ter of business conducted	<b>₽</b>	
(10) 15	Acri	can D	stauren	TIME P.	Day 1 Mines
5. State of Formation	1 111 00	(2)	() 10(0) () /	, fode in	Clared Filma
Khboli Island			T	<u>ani</u>	1
6. Principal Office Address 418 Pinc STV cet			City	State	Zip
			[ Millarni		10000
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person  Contact Name 00/00, CLU Company and Name or Title October					
Contact Name MOVCU) Sich Sr			Contact Title OWN ex		
Street Address A Pnc	Stree	t	city Providen	(c State M	Zip D2963
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Marcus Sich Si			Manager Name		
Street Address Alf Pine Stratt			Street Address		
city Providence	State [[	Zip 07908	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zıp	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	Marners	5.06 G	Date / i / 1 G		
11 VIV CU) 11CV) 8V   G/4/19					
Signature of Authorized Person					
	1	-			
•		1 1		F11 F	: D

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov トルトレ

FORM 632 - Revised: 10/2017