	State of Rhode Island and Pro Office of the Secreta		ns Fee: \$50.00
	Division Of Business		
148 W. River Street Providence RI 02904-2615			
HOPE	(401) 222-30		
Limited Liability Company Annual Report Filing Period: September 1 - November 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2018			
1. ID No. <u>001673067</u>			
2. Exact Name of the Limited Liability Company <u>Bubba's Bud Farm LLC</u>			
3. State of Formation			
State: <u>RI</u>			
	ARTICLE III		
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.			
<u>493130</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
THIS ENTITY WAS CREATED FOR A MEDICAL MARIJUANA CULTIVATION LICENSE			
APPLICATION. THE BUSINESS WAS NOT APPROVED AND NEVER CONDUCTED ANY BUSINESS.			
5. Principal Office Address			
	<u>1 TEN ROD ROAD</u> ETER State	<u>RI</u> Zip: <u>02822</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
-	N SHAKOORI Contact Title:		
No. and Street: 1541 TEN ROD ROAD			
City or Town: <u>EXETER</u> State: <u>RI</u> Zip: <u>02822</u> Country: <u>USA</u>			
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Add	ress
	First, Middle, Last, Suffix	Address, City or Town, S	State, Zip Code, Country

MANAGER

KAYVON SHAKOORI

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

KAYVON SHAKOORI-NAMINY 1541 TEN ROD ROAD EXETER , RI 02822

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 18 Day of July, 2019 at 8:08:47 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By KAYVON SHAKOORI

Signature of Authorized Person

Form No. 632 Revised 09/07

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