RI SOS Filing Number: 201915521770 Date: 8/23/2019 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

→ 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					
000149554	Mike Tuly Basketban Camp LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
5. State of Formation Rhode Island BASKETBALL CAMPS						
Rhode Island 6. Principal Office Address						
41 Lugent Une			BAISTOL	RI	02809	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Michael Tully			Contact Title Owner operator President			
Street Address 41 lugent une		City BRISTOL	State	Zip 02809		
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name	r 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 Date			Date			
Michael Tully				8-19-19		
Signature of Authorized Person 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