

State of Rhode Island and Providence Plantations

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

Annual Report for the year: 2019 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.

FILED	
AUG 2 3 2019	02
2416n	

Entity ID Number		2. Exact name of the Limited Liability Company					
000538710	The LAW OFICES OF BrenDA L. FERRY, LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
<u>499130</u>	Legal services						
5. State of Formation							
RI	<u>                                     </u>		=				
6. Principal Office Address			City	State	Zıp		
1529 MINERAL SP AVE			NP	NI	02904		
7. Mailing Address of Limited Li	ability Company	and Name or Title	e of Contact Person				
Contact Name Brenda Ferry			Contact Title () WNLL				
Street Address TO Anne Lane			City PASCOQG	State	Zip 12859		
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	Zıp	City	State	Zıp		
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 Isla	nd. This informat	ion is currently of rec	cord with the Department of State	e. Changes require filir	ng Form 642.		
Under penalty of perjury, I dec statements, and that all stater	lare and affirm	n that I have examed herein are true	nined this report, including and correct.	any accompanyin	g schedules and		
Name of Authorized Person	-	<del>,,</del> -		Date			
Buenda Form				8-16-19			
Signature of Authorized Person							
Bien da Jerry Sich ( Die MANN HAR)							
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MAIL TO:

**Division of Business Services** 

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

**Phone:** (401) 222-3040 **Website:** www.sos.ri gov