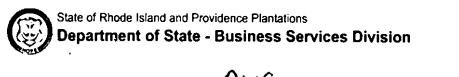
RI SOS Filing Number: 201915698120 Date: 8/26/2019 4:00:00 PM



→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

FILED
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		<u>-</u>	···			
1. Entity ID Number	2. Exact na	Exact name of the Limited Liability Company				
00163361	\Box	1 Cody Gretal, UC				
3. NAICS Code	4. Brief des	scription of the	character of business conduct	ed in Rhode Island		
811490	_ 7-	Book Salas				
5. State of Formation	\neg		30R3			
Rt						
6. Principal Office Address 381 Franklin Street			Bristo	State	Zip 02809	
7. Mailing Address of Lim	ited Liability Compa	iny and Name	or Title of Contact Person			
Contact Name of Milardo			Contact Title			
Smy Address Canclin Street			Bristo	State	Zip 02809	
	mes and addresses	s) of the Limite	ed Liability Company, IF APPLIC	ABLE - DO NOT LIST N	MEMBERS	
Magra			Manager Name			
St@ei-Address			Street Address	Street Address		
~ N N N			City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
				Check the box to in	ndicate an attachment	
9. Resident Agent in Rhoo	de Island. This inform	nation is current	ly of record with the Department of			
			e examined this report, includ			
statements, and that all	statements contai	ned herein a	re true and correct.		,	
Name of Authoriza Person Novald Milwdo Date 8/20/4						
Signature of Authorized Person Wardo 66						

MAIL TO:

Division of Business Services

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

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