s	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.0
	Division Of Business 148 W. River S Providence RI 0290	reet	
HOPE	(401) 222-304		
Limited Liability Com	pany		
Annual Report Filing Period: September 1	- November 1		
	7-16-66(d), each limited liability comp in thirty (30) days after the time presc penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2019</u>		
1. ID No. <u>000121029</u>	2		
2. Exact Name of the Li	mited Liability Company <u>PRASH</u> ,	L.L.C.	
3. State of Formation			
State: <u>RI</u>			
	ARTICLE III		
0	Code that best describes the primary e information on <u>NAICS</u> can be found		
4. Brief Description of th	e Character of the Business Which	is Actually Conducted in Rho	ode Island
<u>RESTAURANT, FOOD</u>	SERVICE,CONVENIENCE STO	DRE	
5. Principal Office Addre	SS		
	THOMPSON ROAD STER State	<u>MA</u> Zip: <u>01570</u> Coun	try: <u>USA</u>
6. Mailing Address of Li	nited Liability Company and Name	or Title of Contact Person:	
No. and Street: 65 F	ANT PATEL MANAGER Contact Title		
City or Town: DUE	DLEY State: MA	<u>A</u> Zip: <u>01571</u> Countr	y: <u>USA</u>
7. Name and Address of DO NOT LIST MEMBER	Each Manager of the Limited Liab RS	ility Company, if Applicable.	
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip C	ode, Country
MANAGER	PRASHANT PATEL	65 FAIRVIEW AV DUDLEY, MA 01571 US	
MANAGER	SHANKERBHAI PATEL	65 FAIRVIEW AV	E

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

RAYMOND A. TOMASSO, ESQ. 1258 ELMWOOD AVENUE PROVIDENCE, RI 02907

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

Signed this 3 Day of September, 2019 at 11:07:15 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 <u>DONALD E RAYMOND</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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