State of Rhode Isla	ind and Provider	nce Plantations		_		
Department o	of State - Bu	siness Servi	ces Division			
مر Annual Report for th	ne vear:	2018			STAMP	
Limited Liability Company					FUP SECPETAPY OF DEATE HERON FOR F	
→ Filing period: September 1 - November 1					2019	
→ Filing Fee: \$50.00	E OO too it toem	is not filed by Da	anamhar 1	_	R.	
→ Penalty: Additional \$2	o.oo lee ii toriii	is not liled by De	cember 1.		P SEE	
1. Entity ID Number	2. Exact n	Exact name of the Limited Liability Company			8 2770	
001670718		At Ease Plumbing, LCC				
3. NAICS Code	4. Brief de	4. Brief description of the character of business conducted in Rhode Island				
038320	0,					
5. State of Formation $\mathcal{R} \mathcal{I}$	- Piu	Mbing, I	Residential & (Commercia	al	
6. Principal Office Address	•		City	State	Zip	
6 Regis St			Covertny	RI	02816	
. Mailing Address of Limite	d Liability Compa	any and Name or	Title of Contact Person	·		
Contact Name Susana Pollaccio			Contact Title EXI. CLHD C A	c Estate of	f Daniel Sollar	
Street Address 6 Regis St			City Coventas	State /	Zip 02816	
3. List ALL managers (name	es and addresse	s) of the Limited L	iability Company, IF APPLICA	BLE - DO NOT LIST		
Manager 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	
		<u>.</u>		Check the box to	indicate an attachment	
. Resident Agent in Rhode	Island. This inform	nation is currently o	f record with the Department of St	ate. Changes require fili	ng Form 642.	
Under penalty of perjury, I statements, and that all st	declare and afi atements conta	firm that I have e ined herein are t	xamined this report, includir	ng any accompanyir	ng schedules and	
Name of Authorized Person				Date	0	
Susana Si	ollaccio			9-4-19		
Signature of Authorized Per	sof	•		•		
XUNAN A	10/1000	نسده و ۹				

MAIL TO:

Division of Business Services

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

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

SEP 0 6 2019 BY W 32 CA A.A. IL'.

FORM 632 - Revised: 08/2016