RI SOS Filing Number: 201918772250 Date: 9/9/2019 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

SIRWIF

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.

1. Entity ID Number	2. Exact name of the Limited Liability Company				
86860	Excell Feeders, LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
722511	Restaurant				
5. State of Formation	=				
RI					
6. Principal Office Address			City	State	Zip
45 Pine Hill Drive			East Greenwich	RI	02818
7. Mailing Address of Limited Lia	ability Compan	y and Name or Tit		•	
Contact Name James Turi			Contact Title Manager		
Street Address 45 Pine Hill Drive			City East Greenwich	State RI	^{Zip} 02818 i
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name James Turi			Manager Name		
Street Address 45 Pine Hill Drive			Street Address		
City East Greenwich	State RI	^{Zip} 02818	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
	,I			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	<u> </u>
James Turi				9	15/19
Signature of Authorized Person SIGN DOCUMENT HERE					
- 117190 LISTS					

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**

