RI SOS Filing Number: 201921342150 Date: 9/23/2019 4:00:00 PM



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	SAAR
SEP 2 3 2019 (	

1. Entity ID Number 1666642	2. Exact name of the Limited Liability Company K&D ENTERPRISES, LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
551114	Business Management						
5. State of Formation	1						
Rhode Island							
6. Principal Office Address			City	State	Zip		
52 Lynde Street	2 Lynde Street			RI	02908		
7. Mailing Address of Limited Lia	ability Compa	ny and Name or	Title of Contact Person				
Contact Name KENNETH TURCHETTA			Contact Title	Contact Title			
Street Address 52 Lynde Street		City Providence	State RI	<sup>Zip</sup> 02908			
8. List ALL managers (names a	nd addresses	s) of the Limited I	Liability Company, IF APPLICAE	BLE - DO NOT LIST	MEMBERS		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address				
City	State	Zip	City	State	Zip		
	<u> </u>		<b>_</b>	Check the box to	indicate an attachment		
9. Resident Agent in Rhode Isla	nd. This inforn	nation is currently o	of record with the Department of Sta	ite. Changes require filii	ng Form 642.		
Under penalty of perjury, I dec statements, and that all states			• •	g any accompanyin	ng schedules and		
Name of Authorized Person Date							
KENNETH TURCHETTA 9//G //9							
Signature of Authorized Person.	link	# SIGN	N DOCUMENT HERE	<i>,</i>			

MAIL TO:

**Division of Business Services** 

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

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