	State of Rhode Island and Pro Office of the Secreta		ONS Fee: \$50.00
	Division Of Business 148 W. River St Providence RI 0290	reet	
HOPE	(401) 222-304		
Limited Liability Cor Annual Report Filing Period: September			
	L. 7-16-66(d), each limited liability comp hin thirty (30) days after the time prescr a penalty fee of \$25.00.		
ANNUAL REPORT YEAR	R: <u>2019</u>		
1. ID No. <u>00169100</u>	<u>)1</u>		
2. Exact Name of the L	imited Liability Company National	Trade Services, LLC	<u>.</u>
3. State of Formation			
State: <u>RI</u>			
State: <u>RI</u>	ARTICLE III		
Enter the six digit NAICS	ARTICLE III Code that best describes the primary lore information on <u>NAICS</u> can be found		y the entity. Download
Enter the six digit NAICS	Code that best describes the primary I		y the entity. Download
Enter the six digit NAICS the list of codes <u>here.</u> Mo	Code that best describes the primary I	online.	· · ·
Enter the six digit NAICS the list of codes <u>here.</u> Mo <u>561210</u> 4. Brief Description of t	Code that best describes the primary lore information on <u>NAICS</u> can be found	online.	· · ·
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Enter the six digit NAICS the list of codes <u>here.</u> Mo <u>561210</u> 4. Brief Description of t <u>FACILITY MAINTEN</u> 5. Principal Office Addr No. and Street: <u>61</u> City or Town: <u>SN</u> 6. Mailing Address of L Contact Name: <u>CHRIS</u> No. and Street: <u>614 GE</u> City or Town: <u>LINCO</u> 7. Name and Address of L	Code that best describes the primary I bre information on <u>NAICS</u> can be found he Character of the Business Which <u>IANCE AND MANAGEMENT</u> ess <u>1 PUTNAM PIKE</u> <u>MITHFIELD</u> State: <u>R</u> imited Liability Company and Name <u>TOPHER P. RIENDEAU</u> Contact Title: <u>CORGE WASHINGTON HIGHWA</u> <u>LN</u> of Each Manager of the Limited Liab	is Actually Conduct <u>I</u> Zip: <u>02828</u> or Title of Contact I <u>PRESIDENT</u> <u>Y</u> State: <u>RI</u> Zip: <u>C</u> ility Company, if Ap	ted in Rhode Island Country: <u>USA</u> Person: 02865 Country: <u>USA</u>

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

CHRISTOPHER P. RIENDEAU 614 GEORGE WASHINGTON HIGHWAY LINCOLN, RI 02865

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

Signed this 1 Day of October, 2019 at 8:48:00 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>CHRISTOPHER P. RIENDEAU</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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