RI SOS Filing Number: 201922411170 Date: 9/30/2019 4:00:00 PM

	١
TALLA.	1
1637	,
Sec. 16	

State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

-> 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 r	2. Exact name of the Limited Liability Company					
986162		3701 Karelatown Zoro Lie					
3. NAICS Code	4. Brief de	4. Brief description of the character of business conducted in Rhode Island					
531118		REBLADATION REPUTAL					
5. State of Formation	⊣						
RE							
6. Principal Office Address			City	State	Zip		
41 TEAR POND RUND			propertienser	RZ	C3881		
7. Mailing Address of Limited	Liability Comp	any and Name o					
Contact Name			Contact Title				
Street Address			City Pressure Courses	State	71		
41 Ten Door Zun			NAMAGARGOTT	PE	Zip 078\$7		
8. List ALL managers (names	and addresse	es) of the Limited	Liability Company, IF APPLICABLE	- DO NOT LIST	MEMBERS		
Monage Alexa			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		
	<del></del>	<u></u>		heck the box to	indicate an attachment		
9. Resident Agent in Rhode Is	land. This infon	mation is currently o	of record with the Department of State. C	hanges require fil	ing Form 642.		
Under penalty of perjury, I d statements, and that all state	eclare and aft	firm that I have (	examined this report, including an	y accompanyi	ng schedules and		
Name of Authorized Person		<del></del>	·	Date	<del></del>		
Robert Eria TATION				9/24/19			
Signature of Authorized Perso	n	-			·		
Rober Eld Tyen			```				
FILED							

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov SEP 3 0 2019 KM

ey 2369