RI SOS Filing Number: 201922641270 Date: 10/3/2019 4:00:00 PM

State of Rhode Isla	and and Providen	ce Plantations				
		siness Service	es Division		291	
Annual Report for the year: 2019 Limited Liability Company					2919 QCT -3	
→ Filing period: Septem → Filing Fee: \$50.00	•	per 1			ָ ֖֖֖֖֓	
→ Penalty: Additional \$2	5.00 fee if form	is not filed by Dece	ember 1.	_	<del></del>	
1. Entity ID Number 000087255	I	2. Exact name of the Limited Liability Company THE GINALSKI FAMILY COMPANY, LLC				
3. NAICS Code  631120  5. State of Formation	i	Brief description of the character of business conducted in Rhode Island     Holding Investments				
State of Formation  Rhode Island						
6. Principal Office Address P O Box 512			City Long Key	State FL	Zip 33001	
7. Mailing Address of Limite		iny and Name or Tit				
Contact Name Gail L. Ellington			Contact Title Member			
Street Address P O Box 512			City Long Key	State FL	<sup>Zip</sup> 33001	
3. List ALL managers (nam	es and addresse:	s) of the Limited Lia	bility Company, IF APPLICA	BLE - DO NOT LIST !	MEMBERS	
GAIL Ellington			Manager Name			
Street Address Po Box 512			Street Address			
Long Kec	State	Zip 3300 (	City	State	Zip	
Manager Name			Manager Name			
Street Address	<u></u>		Street Address			
Dity	State	Zıp	City	State	Zip	
					ndicate an attachment	
9. Resident Agent in Rhode Island. This information is currently of record with the Department of Sta						
Under penalty of perjury, is statements, and that all st	l declare and affi latements contai	irm that I have exa ined herein are tru	mined this report, includir e and correct.	ng any accompanyin	g schedules and	
Name of Authorized Person  Gail L. Ellington				Date 9-	16-19	
Signature of Authorized Per	llingto	/ SIGN D	OCUMENT HERE			
IAIL TO:	O		FILE	D		
ivision of Business Servio 48 W. River Street, Provider hone: (401) 222-3040 /ebsite: www.sos.ri.gov		d 02904-2615	OCT 0 3	2019		
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