



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 **STAMP**
 OCT 03 2019
Handwritten initials and number 66023

1. Entity ID Number 1682053		2. Exact name of the Limited Liability Company Pooch Pawsitive, LLC			
3. NAICS Code 812910		4. Brief description of the character of business conducted in Rhode Island Dog training and dog care			
5. State of Formation RI					
6. Principal Office Address 10 Fairmount Avenue		City East Providence	State RI	Zip 02914	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Heidi P. McNeil		Contact Title Member			
Street Address 12 Welfare Street		City East Providence	State RI	Zip 02914	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name None		Manager Name None			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name None		Manager Name None			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
<i>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.</i>					
Name of Authorized Person Heidi P. McNeil				Date 9/26/19	
Signature of Authorized Person <i>Heidi P. McNeil</i>		SIGN DOCUMENT HERE			

MAIL TO:
 Division of Business Services
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 Website: www.sos.ri.gov