S	tate of Rhode Island and Pro Office of the Secreta	
	Division Of Business	Services
148 W. River Street Providence RI 02904-2615		
HORE	(401) 222-30	
Limited Liability Com Annual Report	ipany	
Filing Period: September 1	- November 1	
	7-16-66(d), each limited liability com in thirty (30) days after the time presc penalty fee of \$25.00	
ANNUAL REPORT YEAR:		
1. ID No. <u>000104224</u>		
2. Exact Name of the Limited Liability Company <u>GARELICK FARMS, LLC</u>		
3. State of Formation		
State: <u>DE</u>		
ARTICLE III		
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download		
-	e information on <u>NAICS</u> can be found	
<u>311500</u>		
4. Brief Description of th	e Character of the Business Whicl	is Actually Conducted in Rhode Island
PROCESS AND DISTRIBUTE DAIRY AND DAIRY-RELATED PRODUCTS.		
5. Principal Office Addre	SS	
No. and Street: <u>2711</u>	N. HASKELL AVENUE	
City or Town: <u>DALI</u>	<u>AS</u> S	tate: \underline{TX} Zip: $\underline{75204}$ Country: \underline{USA}
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:		
Contact Name: Contact		
No. and Street: <u>2711</u> City or Town: DALL	<u>N. HASKELL AVENUE</u> AS St:	ate: TX Zip: 75204 Country: USA
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.		
DO NOT LIST MEMBERS		
Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	KRISTY N. WATERMAN	2711 N. HASKELL AVENUE DALLAS, TX 75204 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

<u>CT CORPORATION SYSTEM</u> <u>450 VETERANS MEMORIAL PARKWAY, SUITE 7A</u> <u>EAST</u> <u>PROVIDENCE</u>, <u>RI</u> <u>02914</u>

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

Signed this 4 Day of October, 2019 at 11:20:55 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>KELLY LETTMANN</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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