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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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2019 OCT -9 P. 12: 36

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.

1. Entity ID Number 000131918		2. Exact name of the Limited Liability Company Unity 3, LLC				
3 NAICS Code	4. Brief des	4. Brief description of the character of business conducted in Rhode Island				
722511	Retaurant	Retaurant/Food and BEVERAGE				
5 State of Formation						
Rhode Island						
6. Principal Office Address		<u> </u>	City	State	Zıp	
5 Wellington Avenue			Newport	RI	02840	
7. Mailing Address of Limited	Liability Compa	iny and Name o				
Contact Name Rui S. Reis			Contact Title Member	Contact Title Member		
Street Address 5 Wellington Avenue			City Newport	State RI	Zip 02840	
8. List ALL managers (name	s and addresse:	s) of the Limited	Liability Company, IF APPLICA	ABLE - DO NOT LIST	MEMBERS	
Manager Name N/A			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zıp	
Manager Name			Manager Name			
Street Address			Street Address	Street Address		
City	State	Zıp	City	State	Zıp	
			1	Check the box to	indicate an attachment	
9. Resident Agent in Rhode I	sland. This inforr	nation is currently	of record with the Department of S	tate. Changes require fili	ng Form 642.	
Under penalty of perjury, I statements, and that all sta			examined this report, include true and correct.	ing any accompanyin	ng schedules and	
Name of Authorized Person	-			Date (C)	10/10	
Rui S. Reis				10/	8/19	
Signature of Authorized Pers	on	NZA SIG	N DOCUMENT HERE	//	09-18	

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov 2:41 FILED

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