s s	tate of Rhode Island and Pro Office of the Secreta		ONS Fee: \$50.0
	Division Of Business 148 W. River St		
HOPE	Providence RI 0290 (401) 222-304		
Limited Liability Com Annual Report	ipany		
Filing Period: September 1	- November 1		
	7-16-66(d), each limited liability comp in thirty (30) days after the time presci penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2019</u>		
1. ID No. <u>000156578</u>	<u>3</u>		
2. Exact Name of the Li	mited Liability Company <u>TARI, Li</u>		
3. State of Formation			
State: <u>RI</u>			
Enter the six digit NAICS (	ARTICLE III	ousiness conducted by	w the entity. Download
the list of codes here. Mor	ARTICLE III Code that best describes the primary e information on <u>NAICS</u> can be found	-	y the entity. Download
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8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

JASON R. MARINELLI, ESQ. 2181 POST ROAD WARWICK , RI 02886

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

**Signed this 16 Day of October, 2019 at 11:03:11 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>CHRISTOPHER LOY WINDLE ESQ.</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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