RI SOS Filing Number: 201924480110 Date: 10/15/2019 4:00:00 PM

State of Rhode Island and Providence Plantations  Department of State - Business Services D	ivision	
Annual Report for the year: 2019 Limited Liability Company	_	STAMP FIFEED FOR SECRETARY OF STATE USE ONLY
<ul> <li>→ Filing period: September 1 - November 1</li> <li>→ Filing Fee: \$50.00</li> <li>→ Penalty: Additional \$25.00 fee if form is not filed by December</li> </ul>	1.	0(OCT # 5.2019 ONY

Entity ID Number	2. Exact nam	ne of the Limited Li	iability Company				
816747	R & C WIRE	R & C WIRELESS, LLC					
8 Slate of Formation RHODE ISLAND	4. Brief description of the character of business conducted in Rhode Island  PHONES						
6. Principal Office Address			City	State	Zip		
1496 BROAD STREET		PROVIDENCE	RI	02905			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name RAMON M. RIVAS CAMACHO		Contact Title MANAGER	Contact Title MANAGER				
Street Address 145 BABCOCK S	TREET		City PROVIDENCE	State RI	<sup>Zip</sup> 02905		
	8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name RAMON M. RIVAS CAMACHO Manager Name ARID			Manager Name ARIDELIS E	LIS E. CABREJA DE RIVAS			
Street Address 145 BABCOCK STREET		Street Address 145 BABCOCK STREET					
City PROVIDENCE	State RI	Zip 02905	City PROVIDENCE	State RI	<sup>Zıp</sup> 02905		
Manager Name		Manager Name					
Street Address		Streel Address	Street Address				
City	State	Zip	City	State	Zip		
	<u> </u>			Check the box to i	ndicate an attachment		
9. Resident Agent in Rhode Island, This information is currently of record with the Department of State. Changes require filing Form 642.							
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.							
Name of Authorized Person				Date			
RAMON N. RIVAS CAMACHO			09/18/20	019			
Signature of Alphorized Person							
SIGN DOCUMENT HERE							

MAIL TO:

Division of Business Services

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

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