s s	tate of Rhode Island an Office of the Se			Fee: \$50.00
	148 W. F	usiness Services River Street RI 02904-2615		
HOPE	(401) 2	22-3040		
Limited Liability Company Annual Report Filing Period: September 1 - November 1				
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.				
ANNUAL REPORT YEAR: 2019				
1. ID No. <u>000541944</u>				
2. Exact Name of the Limited Liability Company WILD HARVEST BREADS AND CAFE LLC				
3. State of Formation				
State: <u>RI</u>				
ARTICLE III				
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.				
<u>445210</u>				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
<u>VICTUALLING</u>				
5. Principal Office Addres	SS			
	SOUTH COUNTY TRAIL			
City or Town: <u>EAST</u>	GREENWICH	State: <u>RI</u>	Zip: <u>02818</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: <u>ERICA L MADDALENA</u> Contact Title: <u>MEMBER</u> No. and Street: 1675 SOUTH COUNTY TRAIL				
	<u>GREENWICH</u>	State: <u>RI</u>	Zip: <u>02818</u>	Country: <u>USA</u>
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
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER				

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

ERICA L. MADDALENA 1675 SOUTH COUNTY TRAIL EAST GREENWICH, RI 02818

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

Signed this 29 Day of October, 2019 at 3:59:31 PM 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 ERICA L MADDALENA

Signature of Authorized Person

Form No. 632 Revised 09/07

 $\textcircled{\mbox{\sc only}}$ 2007 - 2019 State of Rhode Island and Providence Plantations All Rights Reserved