RI SOS Filing Number: 201925944620 Date: 10/28/2019 4:00:00 PM

→ Penalty: Additional \$25 00 fee if form is not filed by December 1.

State of Rhode Island and Providence Plantations Department of State - Business Services Division		
Annual Report for the year: 2019 Limited Liability Company	FILED OCT 2 8 2019	
→ Filing period. September 1 - November 1 → Filing Fee: \$50.00	4936	

1 Entity ID Number	2 Evact nam	e of the Limited L	Jahility Company		•		
542122		2 Exact name of the Limited Liability Company Sig's Place, LLC					
3 NAICS Code	4 Brief desc	4 Brief description of the character of business conducted in Rhode Island					
445299	Restaurant	Restaurant					
5. State of Formation							
Rhode Island							
6 Principal Office Address			City	State	Zıp		
1151 Aquidneck Avenue			Middletown	RI	02842		
7 Mailing Address of Limite	d Liability Compan	y and Name or Tit	le of Contact Person	<u> </u>	1		
Contact Name Shawn Margolis			Contact Title Manager				
Street Address 1151 Aquidneck Avenue			City Middletown	State RI	^{Zip} 02842		
		of the Limited Lial	bility Company, IF APPLICAE	BLE - DO NOT LIST I	MEMBERS		
Manager Name Shawn Margolis			Manager Name				
Street Address 1151 Aquidneck Avenue		Street Address					
City Middletown	State RI	^{Zip} 02842	City	State	Zıp		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zıp	City	State	Zıp		
<u></u>	I		<u>, </u>	Check the box to	ndicate an attachment		
9. Resident Agent in Rhode	Island This informa	tion is currently of re	ecord with the Department of Sta	ite. Changes require filir	ng Form 642		
Under penalty of perjury, i statements, and that all st			minea this report, includin e and correct.	g any accompanyin	g schedules and		
Name of Authorized Person Shaw Magdis			Date 10/12/19				
Signature of Authorized Per			gendera H. off	<u> </u>			
	-()/		- waying				

MAIL TO:

Division of Business Services

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

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