

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.

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1. Entity ID Number	2. Exact name of the Limited Liability Company claudette and raye LLC						
3. NAICS Code 448140	4. Brief de	Brief description of the character of business conducted in Rhode Island claudette and raye LLC sells embroidered t-shirts and accessories					
5. State of Formation Rhode Island							
6. Principal Office Address 222 Manolla Avenue			City Warwick	State RI	Zip 02888		
7. Mailing Address of Limited L	iability Compa	any and Name o	r Title of Contact Person				
Contact Name Emily DeSantis			Contact Title Owner				
Street Address 222 Manolla Avenue			City Warwick	State RI	^{Zip} 02888		
8. List ALL managers (names	and addresse	s) of the Limited	Liability Company, IF APPLICA	ABLE - DO NOT LIST	MEMBERS		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
				Check the box to i	ndicate an attachment		
9. Resident Agent in Rhode Isl	and. This inform	mation is currently	of record with the Department of S				
Under penalty of perjury, I de statements, and that all state	eclare and aff	firm that I have	examined this report, includi				
Name of Authorized Person				Date	Date		
Emily Raye DeSantis			10/24/20	10/24/2019			
Signature of Authorized Person	"De&	antie"		•			

MAIL TO:

Division of Business Services

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

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