RI SOS Filing Number: 201926886550 Date: 11/1/2019 4:00:00 PM

	State of Rhode Island and Providence Plantations
	State of Rhode Island and Providence Plantations Department of State - Business Services Division

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 817611	Exact name of the Limited Liability Company SOLIS PAINTING, LLC						
	4. Brief description of the character of business conducted in Rhode Island INTERIOR AND EXTERIOR PAINTING OF STRUCTURES						
5. State of Formation RHODE ISLAND							
6. Principal Office Address 89 GARFIELD STREET			City NORTH PROVIDENCE	State RI	Zip 02904		
7. Mailing Address of Limited Lia	bility Company	and Name or Tit					
Contact Name ANTONIO SOLIS			Contact Title MANAGER				
Street Address 89 GARFIELD ST	REET		C ty NORTH PROVIDENCE	State RI	^{Zip} 02904		
8. List ALL managers (names ar	nd addresses) o	of the Limited Lia	bility Company. IF APPLICABLE -	DO NOT LIST	MEMBERS		
Manager Name ANTONIO SOLIS			Manager Name				
Street Address 89 GARFIELD STREET			Street Address				
City NORTH PROVIDENCE	State RI	Zip 02904	City	State	Zıp		
Manager Name	•	•	Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zıp		
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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 dec statements, and that all statem			mined this report, including any e and correct.	accompanyin	g schedules and		
Name of Authorized Person	Date						
ANTONIO SOLIS			09/23/2019				
Signature of Authorized Person		Te W	COMMITTAL FISHERS				

MAIL TO:

Division of Business Services

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

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