

**FILED** 

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.

1. Entity ID Number	1	2. Exact name of the Limited Liability Company				
001674696	1.100	Reckless Ventures LLC				
3. NAICS Code	4. Brief des	Brief description of the character of business conducted in Rhode Island				
454390	Online sal	Online sales of hobby trading cards				
5. State of Formation	$\neg$					
RI						
6. Principal Office Address			City	State	Zıp	
947 Hope Street			Providence	RI	02906	
7. Mailing Address of Limited	Liability Compa	iny and Name o				
Contact Name Jeffrey Clark Huggins			Contact Title Managing Member			
Street Address 947 Hope Street			City Providence	State RI	<sup>Z<sub>i</sub>p</sup> <b>02906</b>	
8. List ALL managers (name	s and addresse	s) of the Limited	Liability Company, IF APPLICAS	BLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name	1		Manager Name			
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zıp	
				Check the box to	indicate an attachment	
9. Resident Agent in Rhode	Island, This infor	mation is currently	of record with the Department of Sta	ate. Changes require fil	ing Form 642.	
	declare and af	firm that I have	examined this report, includir			
Name of Authorized Person						
Jeffrey Clark Huggins						
Signature of Authorized Pers	son	W 1/2	N DOCUMENT HERE		. ,—	
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MAIL TO:

**Division of Business Services** 

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

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