



Annual Report for the year: 2010
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.

	State Zip ENWICH RI 02818 erson	
5 State of Formation RHODE ISLAND 6. Principal Office Address 65 HULING LANE 7. Mailing Address of Limited Liability Company and Name or Title of Contact Per Contact Name ERIC GREENBERG Street Address 65 HULING LANE City EAST C	ENWICH RI 02818 erson MEMBER	
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7. Mailing Address of Limited Liability Company and Name or Title of Contact Per Contact Name ERIC GREENBERG Contact Title Street Address 65 HULING LANE City EAST C	erson MEMBER	
Contact Name ERIC GREENBERG Street Address 65 HULING LANE Contact Title City EAST C	MEMBER	
Street Address 65 HULING LANE City EAST C		
	GREENWICH State RI Zip 028	
		B18
8. List ALL managers (names and addresses) of the Limited Liability Company,	IF APPLICABLE - DO NOT LIST MEMBERS	
Manager Name Manager Nam	ne	
Street Address Street Address	SS .	
City State Zip City	State Zip	
Manager Name Manager Nam	me	
Street Address Street Address	SS	
City State Zip City	State Zip	
	Check the box to indicate an	attachment
9. Resident Agent in Rhode Island. This information is currently of record with the De	partment of State. Changes require filing Form 642.	
Under penalty of perjury, I declare and affirm that I have examined this rep statements, and that all statements contained herein are true and correct.		es and
Name of Authorized Person Date		
GARY GREENBERG	12/6/2019	
Signature of Authorized Person SIGN DOCUMENT HE	RE	

MAIL TO:

Division of Business Services

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

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

DEC 0.9 2019

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