RI SOS Filing Number: 201930498350 Date: 12/20/2019 4:00:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

S CRETA LY OF STATE CORPORATIONS DIV

2019 DEC 20 PM 1: 34

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	2. Exact name of the Limited Liability Company				
100794					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
111998	*** **				
1111	All other miscellaneous crop fairning				
5. State of Formation				V	
Shode Sland					
6. Principal Office Address			City	State	Zip
131 CLAY ST.			Central fall:	s RI	02863
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Cales Taggart			Contact Title Chees Chaif Executive menaber		
Street Address 31 CLAY St.			city central fa	US State	Zip 02863.
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
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 indicate an attachment					
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 declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Person					
Caleb Taggart				12/2	0/19
Signature of Authorized Person					
COULST SECONS					

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 C

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