



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

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Annual Report for the year: 2017
 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 834595		2. Exact name of the Limited Liability Company MADAVO, LLC			
3. NAICS Code 722511		4. Brief description of the character of business conducted in Rhode Island Operation of a restaurant			
5. State of Formation Rhode Island					
6. Principal Office Address P.O. BOX 231		City JAMESTOWN	State RI	Zip 02835	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name David M. Swicki			Contact Title		
Street Address P.O. BOX 231		City JAMESTOWN	State RI	Zip 02835	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name None		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 <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 842.					
<i>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.</i>					
Name of Authorized Person David M. Swicki			Date 1/6/20		
Signature of Authorized Person 		SIGN DOCUMENT HERE			

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2815
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

FILED

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BY CU 5MX86
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FORM 632 - Revised: 10/2017