RI SOS Filing Number: 202033422510 Date: 1/30/2020 2:01:00 PM



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

PECETVED SECRETARY OF STATE CORPORTING 13 2 V

2020 JAN 30 PH 1:58

→ 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	Entity ID Number 2. Exact name of the Limited Liability Company					
001076453	Sea Side Your LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
812190	your studio and butique.					
5. State of Formation	1 1000	J. 30. 3	,			
01						
6. Principal Office Address		City	State	Zip		
			ا م م	01	Δα- ·	
104 CICKTONEY SONGER			10/15/MULL	KI	102871	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Jasica Laudati			Contact Title Dww.V			
Street Address			City	State	Zip CCT	
	ituer S		Potsmull		02871	
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.	1 7in	City .	State	Zio _	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
			<u> </u>	Check the bo	x 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 Date						
Jessica laudiati				9/23/2019		
Signature of Authorized Person Usocoa Soudant DOGUMENT PERE						
	<u> </u>				IED C	

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 ~

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FORM 632 - Revised: 10/2017