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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

AMENDMENT

2020 FEB 21 P 1:53

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 <u>001680471</u>		2. Exact name of the Limited Liability Company <u>Lit Lounge Night Club LLC</u>	
3. NAICS Code <u>02907</u>		4. Brief description of the character of business conducted in Rhode Island <u>NIGHT CLUB ENTERTAINMENT</u>	
5. State of Formation <u>ST. RI</u>			
6. Principal Office Address <u>971 Broad St</u>		City <u>PROV</u>	State <u>RI</u> Zip <u>02907</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>Carola L Carpio</u>		Contact Title <u>Manager.</u>	
Street Address <u>971 Broad St</u>		City <u>PROV</u>	State <u>RI</u> Zip <u>02907</u>
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name <u>MARTHA FERNANDEZ</u>		Manager Name <u>T</u>	
Street Address <u>25 Geneva St</u>		Street Address	
City <u>PROV</u>	State <u>RI</u>	Zip <u>02903</u>	
Manager Name <u>Carola L Carpio</u>		Manager Name	
Street Address <u>52 Webster Ave Providence</u>		Street Address	
City <u>PROV</u>	State <u>RI</u>	Zip <u>02909</u>	
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 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 <u>Martha Fernandez</u>		Date <u>2/21/2020</u>	
Signature of Authorized Person 			

## 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

FEB 21 2020

BY



State of Rhode Island and Providence Plantations  
**Department of State | Office of the Secretary of State**  
**Nellie M. Gorbea**, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island  
and Providence Plantations, hereby certify that this document, duly executed in  
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as  
amended, has been filed in this office on this day:

February 21, 2020 01:53 PM

The signature is written in a cursive, flowing style in blue ink. It appears to read "Nellie M. Gorbea".

Nellie M. Gorbea  
*Secretary of State*

