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2020 FEB 25 P 2: 55

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	Exact name of the Limited Liability Company				
1685246	Bradh	J. LLC			
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
712120	Walking	Tours			
5. State of Formation	] <i>J</i>				
MI					
6. Principal Office Address			City O	State	Zip
202 Lypith Street #3			Providence	KI	02906
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Bradh Van Per Sta 2			Contact Title Exceptive Pirector		
Street Address 202 CLINI: H Treet #3			City Providence	State	ZIP 02406
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 Date					
1/17/ Sady J. Varler Stad 1 02/25/2020					
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** 

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