



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

Annual Report for the year: **2015**
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

STAMP

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FOR THE SECRETARY OF STATE
BUS. SVCS. DIV.
2020 MAY - 6 PM 3:43

1. Entity ID Number 000918021		2. Exact name of the Limited Liability Company CICLON IMPORTS LLC			
3. NAICS Code 425120		4. Brief description of the character of business conducted in Rhode Island IMPORT & EXPORT			
5. State of Formation RI					
6. Principal Office Address 6145 POST ROAD			City NORTH KINGSTOWN	State RI	Zip 02852
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name SEAN R. DOHERTY, ESQ.			Contact Title REGISTERED AGENT		
Street Address 6145 POST ROAD, UNIT 6			City NORTH KINGSTOWN	State RI	Zip 02852
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 <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 ESTEBAN CRUZ				Date 04/29/2020	
Signature of Authorized Person 				SIGN DOCUMENT HERE	

FILED

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov

MAY 06 2020
BY **53MRD**
AA 3:44p.m