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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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.

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2020 JUN 29 PM 3: 36

1. Entity ID Number	2. Exact name of the Limited Liability Company			
000160363	BLISS Publications			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
511199	Wedding Resource Publication			
5. State of Formation				
Rhode Island				
6. Principal Office Address		City	State Zip	
19 3rd St		Barrington	RI 02806	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Amy Blau		Contact Title Managing Member		
Street Address 19 3R2 St.		City Barrington	State 2 Zip 02806	
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	City	State	
Manager Name		Manager Name		
Street Address		Street Address		
City	State	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				
Amy Blays 1 6/26/20				
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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