



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.

**FILED**  
**AUG 12 2020**  
 BY ASLOS  
 DS

<b>1. Entity ID Number</b> 000507278		<b>2. Exact name of the Limited Liability Company</b> Waterford Laundromat, LLC					
<b>3. NAICS Code</b> 812310		<b>4. Brief description of the character of business conducted in Rhode Island</b> Coin operated laundromat; includes self-serve and drop off. Dry cleaning sent off premises for processing.					
<b>5. State of Formation</b> RI							
<b>6. Principal Office Address</b> 561 Main Street				<b>City</b> East Greenwich		<b>State</b> RI	<b>Zip</b> 02818
<b>7. Mailing Address of Limited Liability Company and Name or Title of Contact Person</b>							
<b>Contact Name</b> Karen Nutini				<b>Contact Title</b> Owner			
<b>Street Address</b> 561 Main Street				<b>City</b> East Greenwich		<b>State</b> RI	<b>Zip</b> 02818karen N
<b>8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS</b>							
<b>Manager Name</b>				<b>Manager Name</b>			
<b>Street Address</b>				<b>Street Address</b>			
<b>City</b>		<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
<b>Manager Name</b>				<b>Manager Name</b>			
<b>Street Address</b>				<b>Street Address</b>			
<b>City</b>		<b>State</b>	<b>Zip</b>	<b>City</b>		<b>State</b>	<b>Zip</b>
Check the box to indicate an attachment <input type="checkbox"/>							
<b>9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.</b>							
<i>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.</i>							
<b>Name of Authorized Person</b> Karen Nutini						<b>Date</b> 8/9/2020	
<b>Signature of Authorized Person</b> 				<b>SIGN DOCUMENT HERE</b>			

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