	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business	Services	
	148 W. River S		
	Providence RI 0290 (401) 222-304		
HOPE	(401) 222-304	+0	
Limited Liability Com Annual Report	pany		
Filing Period: September 1	- November 1		
	7-16-66(d), each limited liability comp n thirty (30) days after the time presc penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2020</u>		
1. ID No. <u>001684672</u>			
2. Exact Name of the Limited Liability Company Rugged Entrepreneurs LLC			
3. State of Formation			
State: <u>RI</u>			
	Code that best describes the primary e information on <u>NAICS</u> can be found	-	no onity. Dominati
4. Brief Description of the	e Character of the Business Which	is Actually Conducted	d in Rhode Island
RETAIL MATTRESS & FURNITURE STORE			
5. Principal Office Addres	SS		
No. and Street: 601 METACOM AVENUE			
		ate: <u>RI</u> Zip: <u>02885</u>	Country: USA
6. Mailing Address of Lin	nited Liability Company and Name	or Title of Contact Pe	erson:
Contact Name: KYLE SHERRATT Contact Title: OWNER			
	METACOM AVE RREN State:	<u>RI</u> Zip: <u>02885</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Addro	ess
	First, Middle, Last, Suffix	Address, City or Town, St	ate, Zip Code, Country
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER			

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

<u>UNITED STATES CORPORATION AGENTS, INC.</u> <u>222 JEFFERSON BOULEVARD, SUITE 200</u> <u>WARWICK</u>, <u>RI</u> <u>02888</u>

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 9 Day of September, 2020 at 6:33:41 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By <u>KYLE SHERRATT</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2020 State of Rhode Island All Rights Reserved