RI SOS Filing Number: 202056586880 Date: 9/21/2020 9:31:00 AM

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State of Rhode Island

Department of State - Business Services Division

2020 SEP 21 AM 9: 34

Annual Report for the year: **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	2 Exact name of the Limited Liability Company				
001673403	Sax	ennet	Hanes, LLC		
3. NAICS Code	4 Bire! description of the character of business conducted in Rhode Island				
236118	Desid	ential	Remodely of residential		
5 State of Formation	paper	has	O		
hI.	410400				
6. Principal Office Address			City	State	Zıp
253 West Main Road			Little Comotion	KI	07837
7 Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name AMUNDA NICKERSON TOSE Pricipal					
Strong Angress West Main Vid			"Title Compra	State	20 OF 37
8 List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Nome		
Stinet Address			Stroet Address		
C1y	State	Zip	City	State	Ζíφ
Manager Name		<u>* </u>	Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zφ
Check the box to indicate an artachment					
9. The Resident Agent information currently of record with the RI Department of State is accurate. 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 Himan da Nillerson 10ste 09/20/2000					
Signature of Authorized Person Therefore Many Moste					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040

Website: www.sos.ii gov

FILED

SEP 2 1 2020

FORM 632 - Revised: 08/2020

https://www.sos.ri.gov/assets/downloads/documents/632 limited-liability company-annual-report.pc