Annual Report Filing Period: September 1 - November 1 In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-	\$50.0 
148 W. River Street Providence RI 02904-2615 (401) 222-3040         Limited Liability Company Annual Report         Filing Period: September 1 - November 1         In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7- 16-66(b&c)) is subject to a penalty fee of \$25.00.         ANNUAL REPORT YEAR: 2020         1. ID No. 000540611         2. Exact Name of the Limited Liability Company WALWORTH BRUNS, LLC         3. State of Formation         State: RI         ARTICLE III	
Providence RI 02904-2615 (401) 222-3040         Limited Liability Company Annual Report         Filing Period: September 1 - November 1         In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7- 16-66(b&c)) is subject to a penalty fee of \$25.00.         ANNUAL REPORT YEAR: 2020         1. ID No.       000540611         2. Exact Name of the Limited Liability Company WALWORTH BRUNS, LLC         3. State of Formation State: RI         Litte: RI	
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the list of codes here. More information on NAICS can be found online	bad
<u>541611</u>	
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Islan	d
PROVIDES ADVISORY SERVICES REGARDING INFORMATION TECHNOLOGY	
5. Principal Office Address	
No. and Street: 35 BENEFIT STREET	
City or Town:PROVIDENCEState: RIZip: 02904Country: USA	
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:	
Contact Name: Contact Title:	
No. and Street: <u>35 BENEFIT STREET</u>	
City or Town: <u>PROVIDENCE</u> State: <u>RI</u> Zip: <u>02904</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 Address	

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

CHARLES W. HEWITT <u>35 BENEFIT STREET</u> <u>PROVIDENCE</u>, <u>RI</u> <u>02904</u>

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

**Signed this 23 Day of September, 2020 at 3:41:36 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>CHARLES W. HEWITT</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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