Office of the Secretary of State     Division Of Business Services     148 W. River Street     Providence RI 02904-2615     (401) 222-3040						
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 relusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7- 16-66(b&2)) is subject to a penalty fee of \$25.00.     ANNUAL REPORT YEAR: 2020     1. ID No. 000792208     2. Exact Name of the Limited Liability Company EVENTS AT WORK LLC     3. State of Formation State: RI     ARTICLE III     Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online.     541613     4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island LOCATION SCOUTING AND CONSULTING FOR MARKETING EVENTS     5. Principal Office Address     No. and Street:   111 SWEETBRIAR DR. Citly or Town:   CRANSTON   State: RI   Zip: 02920   Country: USA     6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:     Contact Name:   HOLLY MOLLCONE Contact Title:   PRESIDENT:     No. and Streee:   111 SWEETBRIAR DR.		••••••			Fee: \$50.00	
Providence RI 02904-2615 (401) 222-3040     Limited Liability Company Annual Report     Filing Period: September 1 - November 1     In accordance with R1.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 tee of \$25.00.     ANNUAL REPORT YEAR: 2020     1. ID No.   000792208     2. Exact Name of the Limited Liability Company EVENTS AT WORK LLCC     3. State of Formation     State: RI     ARTICLE III     Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.     541613     4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island     LOCATION SCOUTING AND CONSULTING FOR MARKETING EVENTS     5. Principal Office Address     No. and Street:   111 SWEETBRIAR DR. City or Town:   Zip: 02920   Country: USA     6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:   Contact Name:   HOLLY MOLLCONE Contact Title:   PRESIDENT:     No. and Street:   111 SWEETBRIAR DR. City or Town:   CRANSTON   State: RI   Zip: 02920   Country: USA     6. Mailing Address of Limited				ices		
(401) 222-3040     Limited Liability Company 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 with hirdy (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. 000792208     2. Exact Name of the Limited Liability Company EVENTS AT WORK LLC     3. State of Formation State: RI     ARTICLE III     Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online. <u>541613</u> 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island LOCATION SCOUTING AND CONSULTING FOR MARKETING EVENTS     5. Principal Office Address     No. and Street:   III SWEETBRIAR DR. City or Town:   CRANSTON   State: RI   zip: 02920   Country: USA     6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:     Contact Name:   HOLLY MOLLCONE Contact Title:   PRESIDENT No. and Street:   III SWEETBRIAR DR. City or Town:   CRANSTON   State: RI   zip: 02920   Country: USA   Contact Name: <td colspan="6"></td>						
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. 0000792208 2. Exact Name of the Limited Liability Company EVENTS AT WORK LLC 3. State of Formation State: RI ARTICLE III Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online. 541613 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island LOCATION SCOUTING AND CONSULTING FOR MARKETING EVENTS 5. Principal Office Address No. and Street: 111 SWEETBRIAR DR. City or Town: CRANSTON State: RI Zip: 02920 Country: USA 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person: Contact Name: HOLLY MOLLICONE Contact Title: PRESIDENT No. and Street: 111 SWEETBRIAR DR. City or Town: CRANSTON State: RI Zip: 02920 Country: USA 7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS Title Individual Name Address						
Annual Report     Fling Period: September 1 - November 1     In accordance with R.I.G.L. 7-16-86(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(b2c)) is subject to a penalty fee of \$25.00.     ANNUAL REPORT YEAR:   2020     1. ID No.   000792208     2. Exact Name of the Limited Liability Company EVENTS AT WORK LLC     3. State of Formation     State:   RI     ARTICLE III     Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online.     541613     4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island     LOCATION SCOUTING AND CONSULTING FOR MARKETING EVENTS     5. Principal Office Address     No. and Street:   111 SWEETBRIAR DR. City or Town:   CRANSTON   State: RI   Zip: 02920   Country: USA     6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:     Contact Name: HOLLY MOLLCONE Contact Title:   PRESIDENT     No. and Street:   111 SWEETBRIAR DR. City or Town:   CRANSTON   State: RI   Zip: 02920	HOPE	(401)	222-3040			
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ARTICLE III     ARTICLE III     Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.     541613     A Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island     LOCATION SCOUTING AND CONSULTING FOR MARKETING EVENTS     5. Principal Office Address     No. and Street:   111 SWEETBRIAR DR. City or Town:   CRANSTON   State: RI   Zip: 02920   Country: USA     6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:     Contact Name:     MOLLY MOLLICONE Contact Title:   PRESIDENT     No. and Street:   111 SWEETBRIAR DR. City or Town:   CRANSTON   State: RI   Zip: 02920   Country: USA     6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:     Contact Name:     MOLLY MOLLICONE Contact Title:   PRESIDENT     No. and Street:   111 SWEETBRIAR DR. City or Town:   CRANSTON   State: RI   Zip: 02920   Country: USA     A Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS <td colspan="6">2. Exact Name of the Limited Liability Company <u>EVENTS AT WORK LLC</u></td>	2. Exact Name of the Limited Liability Company <u>EVENTS AT WORK LLC</u>					
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IOCATION SCOUTING AND CONSULTING FOR MARKETING EVENTS     5. Principal Office Address     No. and Street:   111 SWEETBRIAR DR. City or Town:   State: RI   Zip: 02920   Country: USA     6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:     Contact Name:   HOLLY MOLLICONE Contact Title:   PRESIDENT     No. and Street:   111 SWEETBRIAR DR. City or Town:   CRANSTON   State: RI   Zip: 02920   Country: USA     Contact Name:     HOLLY MOLLICONE Contact Title:   PRESIDENT     No. and Street:   111 SWEETBRIAR DR. City or Town:   CRANSTON   State: RI   Zip: 02920   Country: USA     7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS     Title   Individual Name   Address	<u>541613</u>					
5. Principal Office Address     No. and Street:   111 SWEETBRIAR DR. CRANSTON     State:   RI     Zip:   02920     Country:   USA     6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:     Contact Name:   HOLLY MOLLICONE Contact Title:     PRESIDENT     No. and Street:   111 SWEETBRIAR DR. CIty or Town:     CRANSTON   State:     RI   Zip:     02920   Country:     USA     On and Street:   111 SWEETBRIAR DR. CRANSTON     City or Town:   CRANSTON     State:   RI     Zip:   02920     Country:   USA	4. Brief Description of th	e Character of the Busines	s Which is A	ctually Conducte	ed in Rhode Island	
No. and Street: City or Town:111 SWEETBRIAR DR. CRANSTONState: RIZip: 02920Country: USA6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:Contact Name: No. and Street: City or Town:HOLLY MOLLICONE Contact Title: 111 SWEETBRIAR DR. CRANSTONPRESIDENT State: RIZip: 02920Country: USA7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERSIndividual NameAddress	LOCATION SCOUTING AND CONSULTING FOR MARKETING EVENTS					
City or Town:CRANSTONState: RIZip: 02920Country: USA6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:Contact Name:HOLLY MOLLICONE Contact Title:PRESIDENTNo. and Street:111 SWEETBRIAR DR. CRANSTONState: RIZip: 02920Country: USA7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.Do NOT LIST MEMBERSIndividual NameAddress	5. Principal Office Addre	SS				
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City or Town:   CRANSTON   State: RI   Zip:   02920   Country:   USA     7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.   DO NOT LIST MEMBERS     Title   Individual Name   Address			PRESIDENT			
DO NOT LIST MEMBERS   Title Individual Name Address			State: <u>RI</u>	Zip: <u>02920</u>	Country: <u>USA</u>	
	Title	Individual Name		Add	ress	
First, Middle, Last, Suffix     Address, City or Town, State, Zip Code, Country		First, Middle, Last, Suffix	: A	ddress, City or Town,	State, Zip Code, Country	
	8. RESIDENT AGENT IN F	RHODE ISLAND - DO NOT A	LTER			

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

HOLLY L. MOLLICONE 111 SWEETBRIAR DRIVE CRANSTON, RI 02920

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

Signed this 29 Day of September, 2020 at 10:41:39 AM 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 HOLLY MOLLICONE

Signature of Authorized Person

Form No. 632 Revised 09/07

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