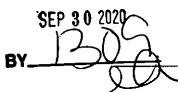


## **Department of State - Business Services Division**

## Annual Report for the year: 2020 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.

<b>FIL!</b>	ED
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1. Entity ID Number	/ ID Number 2. Exact name of the Limited Liability Company						
894307	GREENW	GREENWAVE LANDSCAPE & HORTICULTURAL SERVICES, LLC.					
3. NAICS Code 541390	<b>I</b>	Brief description of the character of business conducted in Rhode Island LANDSCAPING AND HORTICULTURAL SERVICE.					
5. State of Formation							
RHODE ISLAND							
6. Principal Office Address			City	State	Zip		
75 PLEASANT STREET			RUMFORD	RI	02916		
7. Mailing Address of Limited	Liability Compa	any and Name o	r Title of Contact Person				
Contact Name SEBASTIAN R. SANCHEZ			Contact Title MEMBER	Contact Title MEMBER			
Street Address 75 PLEASANT STREET			City RUMFORD	State RI	<sup>Zip</sup> 02916		
	and addresse	s) of the Limited	Liability Company, IF APPLICAE	BLE - DO NOT LIST	MEMBERS		
Manager Name NONE			Manager Name	Manager Name			
Street Address		Street Address	Street Address				
C:ty	State	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
			<u> </u>	Check the box to	indicate an attachment		
: ne Resid int Agent inform	ation currently	of record with the	e RI Department of State is accu	urate. ெறுக்க roquir	e filing Form 642.		
Under penalty of perjury, I o statements, and that all stat			examined this report, including true and correct.	igiy tocompanyin	schedules and		
Name of Authorized Person			Date	Date			
SEBASTIAN R. SANCHEZ			9/10/20	9/10/2020			
Signature of Authorized Person							
LV				<del></del>	. <u></u>		

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov