State of Rhode Island and Providence Plantations
Department of State - Business Services Division

STAMP

FILED FOR SECRETARY OF STATE USE ONLY

OCT 05 2020

BY 590 DS

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.

1 Entity ID Number	2. Exact name of the Limited Liability Company
971155	R MEDINA, LLC
3 NAICS Code 423110 42 - Wholesale Trade	4. Brief description of the character of business conducted in Rhode Island WHOLESALE DISTRIBUTOR
5. State of Formation RHODE ISLAND	

6 Principal Office Address	City	State	Zip
121 ROOSEVELT STREET	PROVIDENCE	RI	02909

7. Mailing Address of Limited Liability Company and Name or Title of Contact Person

Contact Name	Contact Title		
RIGOBERTO MEDINA	MANAGER		
Street Address: 121 ROOSEVELT STREET	City: PROVIDENCE	State: RI	Zip: 02909

8. List **ALL** managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - **DO NOT LIST MEMBERS**

Manager Name			Manager Name		
RIGOBERTO MEDINA					
Street Address: 121 ROOSEVELT STREET			Street Address		
City: PROVIDENCE	State: RI	Zip: 02909	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip

Check the box to indicate an attachment ☐

9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. 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	Date
RIGOBERTO MEDINA	09/04/2020

Signature of Authorized Person: X Rigoberto Medina SIGN DOCUMENT HERE

MAIL TO:
Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov