



State of Rhode Island  
**Department of State - Business Services Division**

**FILED**

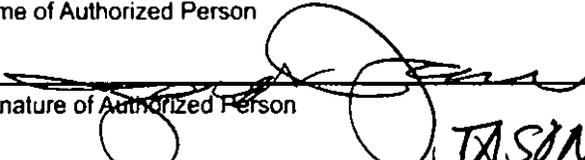
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**Annual Report for the year:** 2020  
**Limited Liability Company**

- 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 1690495		2. Exact name of the Limited Liability Company MI-BOX of Rhode Island, LLC			
3. NAICS Code 531130		4. Brief description of the character of business conducted in Rhode Island Storage Unit Rentals			
5. State of Formation RI					
6. Principal Office Address 5 Valley View Drive			City North Smithfield	State RI	Zip 02896
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Jason Jarvis			Contact Title Member		
Street Address 5 Valley View Drive			City North Smithfield	State RI	Zip 02896
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.					
<i>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.</i>					
Name of Authorized Person				Date	
 Signature of Authorized Person				10/6/2020	
					

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