RI SOS Filing Number: 202066356200 Date: 10/15/2020 4:00:00 PM



State of Rhode Island

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.

	FILED	STAMP	
	OCT 1 5 2020	N Comment	
Y	70907		

1, Entity ID Number	ty ID Number 2. Exact name of the Limited Liability Company					
797110	DOLCI DAL COURE, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
722320	CATERING, BAKERY AND PROMOTION					
5. State of Formation]					
RI						
6. Principal Office Address			City	State	Zip	
226 SOUTH MAIN STREET			PROVIDENCE	RI	02903	
7. Mailing Address of Limited Lia	bility Compan	y and Name or Tit			·	
Contact Name DEBORA LEPORE	3		Contact Title MANAGER			
Street Address 226 SOUTH MAIN STREET			City PROVIDENCE	State RI	^{Zip} 02903	
8. List ALL managers (names a	nd addresses)	of the Limited Lia	bility Company, IF APPLICABL	E - DO NOT LIST	MEMBERS	
Manager Name DEBORA LEPORE			Manager Name			
Street Address 226 SOUTH MAIN STREET			Street Address			
City PROVIDENCE	State RI	Zip 02903	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. The Resident Agent information	on currently of	record with the R	Department of State is accura	ate. Changes requir	e filing Form 642.	
Under penalty of perjury, I dec statements, and that all staten	lare and affir nents contain	m that I have exa ed herein are tru	mined this report, including se and correct.	any accompanyin	ng schedules and	
Name of Authorized Person				Date		
DEBORA LEPORE				10/15/6	<i>'0</i>	
Signature of Authorized Person	u Jenn					

MAIL TO:

Division of Business Services

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

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