RI SOS Filing Number: 202066332330 Date: 10/15/2020 4:00:00 PM





State of Rhode Island and Providence Plantations

Department of State - Business Services Division

2020 Annual Report for the year: **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.

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OCT 15 2020

1. Entity ID Number 794041		2. Exact name of the Limited Liability Company TWISTED COLLISION, LLC					
•			•				
3. NAICS Code	4. Brief desc	Brief description of the character of business conducted in Rhode Island					
812990	Boat charte	Boat charters and advertising.					
5. State of Formation							
Rhode Island					I		
6. Principal Office Address			City	State	Zıp		
2244 Pawtucket Avenue			East Providence	RI	02914		
7. Mailing Address of Limited	d Liability Compan	iy and Name or Tit	tle of Contact Person				
Contact Name Stephen J. DiGianfilippo, Esq.		Contact Title Attorney	Contact Title Attorney				
Street Address 50 Park Row West, Suite 111		C:ty Providence	State RI	Zip 02903			
		of the Limited Lia	ability Company, IF APPLICAE	BLE - DO NOT LIST	MEMBERS		
Manager Name Dennis J. Bigelow		Manager Name					
Street Address 2244 Pawtucket Avenue		Street Address					
City East Providence	State RI	Z ^(p) 02914	City	State	Zip		
Manager Name		Manager Name					
Street Address		Street Address	Street Address				
City	State	Zip	City	State	Zıp		
				Check the box to	indicate an attachment		
9. Resident Agent in Rhode	Island, This informa	ation is currently of re	ecord with the Department of Stat	te. Changes require filir	ng Form 642.		
Under penalty of perjury, I statements, and that all sta			amined this report, including ie and correct.	g any accompanyin	g schedules and		
Name of Authorized Person				Date \	1		
Dennis J. Bigelow				/\c	1/2020		

SIGN DOCUMENT HERE

MAIL TO:

Division of Business Services

of Authorized Person

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

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