State of Rhode Island Department of St	tate - Busi	ness Servic	es Division		
Annual Report for the y Limited Liability Compa  → Filing period: September  → Filing Fee: \$50.00  → Penalty: Additional \$25.00	iny 1 - Novembe		ember 1. BY	FILED  OCT 15 2020	
1. Entity ID Number	2. Exact name of the Limited Liability Company				
001688370	Cindrich Contracting, LLC				
3. NAICS Code 23-Construction  5. State of Formation  RI	4. Brief description of the character of business conducted in Rhode Island  Management of construction projects				
6. Principal Office Address			City	State	Zip
381C Waites Corner Rd.			West Kingston	Ri	02892
7. Mailing Address of Limited Lia	bility Company	and Name or Ti	tle of Contact Person		
Contact Name Frederick D. Cindrich			Contact Title Member		
Street Address 381C Waites Corner Rd.			City West Kingston	State RI	Zip 02892
8. List ALL managers (names ar	nd addresses)	of the Limited Lia	bility Company, IF APPLICABL	E - 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	Zíp
	<u> </u>			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			· -	any accompanyin	g schedules and
Name of Authorized Person				Date	

## MAIL TO:

**Division of Business Services** 

Signature of Authorized Person

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

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

Frederick D. Cindrich