



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

**FILED**

OCT 15 2020

BY 10/17 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 001674157		2. Exact name of the Limited Liability Company James H. Miller, LLC			
3. NAICS Code 541690		4. Brief description of the character of business conducted in Rhode Island Consulting			
5. State of Formation RI					
6. Principal Office Address 15 Bean Farm Dr.		City Kingston	State RI	Zip 02881	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name James H. Miller			Contact Title Member		
Street Address 15 Bean Farm Dr.		City Kingston	State RI	Zip 02881	
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 James H. Miller			Date 10/5/2020		
Signature of Authorized Person					

**MAIL TO:**  
 Division of Business Services  
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