RI SOS Filing Number: 202066372200 Date: 10/19/2020 4:00:00 PM



State of Rhode Island

Department of State - Business Services Division

FILED

Annual Report for the year: Limited Liability Company

ne year: 2020

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

OCT 19 2020 BY \SSY\'
BY DS

1. Entity ID Number 805539	2. Exact name of the Limited Liability Company SIGN SYSTEM SOLUTIONS, LLC					
3. NAICS Code STORY 81 - OTHER SERVICES	4. Brief description of the character of business conducted in Rhode Island SALES AND SERVICES OF ARCHITECTURAL SIGNANGE					
5. State of Formation MA						
6. Principal Office Address 7 SADIE LANE			City HOPKINTON	State MA	Zip 01748	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name STACY BURDEN			Contact Title ACCOUNTING MANAGER			
Street Address 25 WEST UNION STREET, SUITE 202			City ASHLAND	State MA	^{Zip} 01721	
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						
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.						
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.						
Name of Authorized Person				Date	Date	
STACY BURDEN				10/13/20	10/13/2020	
Signature of Authorized Person						

MAIL TO:

Division of Business Services

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

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