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 USE ONLY

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 001677175		2. Exact name of the Limited Liability Company STUDIO RAINWATER LLC			
3. NAICS Code 541430		4. Brief description of the character of business conducted in Rhode Island Designing and branding studio			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 110 KING PHILIP ROAD, SUITE 2F		City RUMFORD	State RI	Zip 02916	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name JOSEPH RAHEB			Contact Title ATTORNEY		
Street Address 650 WASHINGTON HWY., SUITE 200		City LINCOLN	State RI	Zip 02865	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name NONE		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. Resident Agent in Rhode Island. This information is currently of record with the Department of State. 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 SARAH RAINWATER				Date 10/5/20	
Signature of Authorized Person <i>X Sarah Rainwater</i>		SIGN DOCUMENT HERE			

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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 OCT 23 2020
 BY P48PF