



State of Rhode Island
Office of the Secretary of State

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

Limited Liability Company
Annual Report

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2020

1. ID No. 001692010

2. Exact Name of the Limited Liability Company Kachet LLC

3. State of Formation

State: RI

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

453220

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

BECAUSE OF COVID19, MY BUSINESS HAS NOT OPENED IN A PHYSICAL LOCATION AS PLANNED FOR ON MAY 1, 2020. HOWEVER I HAVE BEEN MAKING CANDLES, CRAFTS, JEWELRY, ETC TO PUT ONLINE AND AM PLANNING ON OPENING ON MAY 1, 2021 AT A LOCATION IN MY TOWN OF NEW SHOREHAM, RI. I WILL CARRY SOUVENIRS, CLOTHING, GIFTS, ETC. FOR THE TOURISTS THAT VISIT AND LOCAL RESIDENTS.

5. Principal Office Address

No. and Street: 774 MITCHELL LANE
City or Town: NEW SHOREHAM State: RI Zip: 02807 Country: US

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: CHARLENE E. TRIPLER Contact Title: BUSINESS OWNER
No. and Street: 774 MITCHELL LANE
City or Town: NEW SHOREHAM State: RI Zip: 02807 Country: US

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.

DO NOT LIST MEMBERS

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
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**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CHARLENE E TRIPLER 774 MITCHELL LANE NEW SHOREHAM , RI 02807

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 24 Day of October, 2020 at 11:59:41 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By CHARLENE E.TRIPLER
Signature of Authorized Person

Form No. 632
Revised 09/07

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