	State of Rhode Office of the Secreta		Fee: \$50.00
HOPE	Division Of Business 148 W. River S Providence RI 0290 (401) 222-304	treet)4-2615	
Limited Liability Com Annual Report Filing Period: September 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. <u>001027266</u>			
2. Exact Name of the Limited Liability Company THE LAMENDOLA FAMILY LLC			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>523910</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
HOLDING OF EQUITY INTERESTS; AND ALL OTHER LAWFUL PURPOSES.			
5. Principal Office Addres	SS		
No. and Street:56 EXCHANGE TERRACECity or Town:PROVIDENCEState: RIZip: 02903Country: USA			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title: No. and Street: <u>31 ALVIN STREET</u> City or Town: <u>WARWICK</u> State: <u>RI</u> Zip: <u>02886</u> Country: <u>USA</u>			
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
MANAGER	First, Middle, Last, Suffix KIMBERLY A. CROWLEY	Address, City or Town, State, Zip 31 ALVIN ST WARWICK, RI 02886 I	

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

MATTHEW J. MCGOWAN, ESQ. 56 EXCHANGE TERRACE PROVIDENCE, RI 02903

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

Signed this 27 Day of October, 2020 at 4:03:42 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 MATTHEW J. MCGOWAN

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2020 State of Rhode Island All Rights Reserved