FILED

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

- 214	ОСТ	26 20)20
BY_		d	X

1 Entity ID Number	2. Exact name of the Limited Liability Company						
001677327	A PURE TAP WATER FILTRATION COMPANY, LLC						
3 NAICS Code	4 Brief description of the character of business conducted in Rhode Island						
999999	Water Filtration Systems						
5 State of Formation							
Rhode Island							
6. Principal Office Address			City	State	Zip		
3 Chamberlain Street			Johnston	RI	02919		
7. Mailing Address of Limited L		y and Name or Tit		<u>**-</u>			
Contact Name Steven A. Moretti, Esq.			Contact Title Registered Agent				
Street Address 1140 Reservoir Avenue			City Cranston	State RI	^{Zıp} 02920		
8 List ALL managers (names		of the Limited Lial	bility Company, IF APPLICA	BLE - DO NOT LIST I	MEMBERS		
Manager Name Kathleen Barattini			Manager Name				
Street Address 3 Chamberlain Street			Street Address				
City Johnston	State RI	Zıp 02919	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
				Check the box to i	ndicate an attachment		
9. Resident Agent in Rhode Isla	and This informa	ition is currently of re	cord with the Department of Sta	nte Changes require filir	ng Form 642.		
Under penalty of perjury, I de statements, and that all state	eclare and affirements contain	m that I have exa	mined this report, including and correct.	ng any accompanyin	g schedules and		
Name of Authorized Person	Date	,					
Kathleen Barattini	()	19(2020					
Signature of Authorized Person							
Mitteens	ssattin	· · · · · · · · · · · · · · · · · · ·					

MAIL TO:

Division of Business Services

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