State of Rhode Is  Department	land of State - Business Services Division			
Annual Report for the year: 2020  Limited Liability Company  → Filing period: September 1 - November 1  → Filing Fee: \$50.00		FILED  OCT 2 6 2020  OCT 2 6 2020		
1. Entity ID Number	2. Exact name of the Limited Liability Company	104		
001601141	CMT Enterprises LLC			

					1		
Entity ID Number	2. Exact name of the Limited Liability Company						
001691141	SMT Enterprises LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
999999	Freelance writing and editing services						
5. State of Formation	1						
Rhode Island							
6. Principal Office Address	<del> </del>	<del></del>	City	State	Zip		
3240 Mendon Road			Cumberland	RI	02864		
7. Mailing Address of Limited Lia	bility Company	and Name or Title		4			
Contact Name Shaun Tolson			Contact Title Manager				
Street Address 3240 Mendon Road			City Cumberland	State RI	<sup>Zip</sup> 02864		
	nd addresses) o	f the Limited Liabi	ility Company, IF APPLICABLE - I	OO NOT LIST ME	MBERS		
Manager Name Shaun Tolson			Manager Name				
Street Address 3240 Mendon Road			Street Address				
City Cumberland	State RI	Zip 02864	City	State	Zip		
Manager Name		•	Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
		<u> </u>	Ch	eck the box to indi	cate an attachment		
9. The Resident Agent information	on currently of re	cord with the RI I	Department of State is accurate. (	Changes require fil	ing Form 642.		
Under penalty of perjury, I dec statements, and that all staten	lare and affirm nents containe	that I have exan d herein are true	nined this report, including any and correct.	accompanying s	chedules and		
Name of Authorized Person	Date						
Shaun Tolson	September 29, 2020						
Signature of Authorized Person	•						

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov