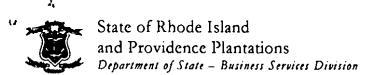
RI SOS Filing Number: 202069804230 Date: 10/29/2020 4:00:00 PM



148 W. River Street Providence, RI 02904-2615 401.222.3040

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR <u>2020</u>

Filing Period: September 1 - November 1 - Filing Fee: \$50.00" - THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

\*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.

1. ID No. 815036	2. Exact name of the limited liability company Hays & Co., LLC			3. NAIG	3. NAICS Gode 541613	
4. Brief description Consulting s	on of the character of the businervices	ness which is actually con	nducted in Rhode Island		5. State of Formation Rhode Island	
6. Principal office address 55 Knollwood Dive			City Hilton Head Island	State SC	2ip 29926	
7. MAILING AD	DRESS OF LIMITED LIAB	BILITY COMPANY AN	ND NAME OR TITLE OF CONTACT PE	RSON:		
Contact Name Timothy A. Hays			Contact Title Member			
Street Address			City State Zip			
55 Knollwood Dive			Hilton Head Island	SC	29926	
8. NAME AND A		GER OF THE LIMITE	D LIABILITY COMPANY, IF APPLICA		LIST MEMBERS	
Manager Name			Manager Name	<u> </u>		
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name		<b></b>	
Street Address			Street Address			
City	State	Zip	City	State	73.1. 1.1.	
9. RESIDENT AC	GENT IN RHODE ISLAND				ह रहे	
This information is	s currently of record in the O	ffice of the Secretary of	interior of Form 642	! – R.I.G.L. 7-16-1		
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	This report mu	ist be executed by an i	authorized person pursuant to R.I.G.L.	7-16-66 (b).		
			Linday pagalist of pagiting Lidasia	and office that I	hava avancinad this armost	
			Under penalty of perjury, I decla including any accompanying set			
			contained herein are true and con	rect.		
File Date					_	
<i>a</i> ,			JE a. Her	10/	21/20	
Check No.		<del></del>	Signature of Juthorized Person	D	ate	
B)v						
	RETARY OF STATE USE ONLY		Ti	<b>L</b>		
			Timothy A. Hays, Mem	per		

Print or Type Name of Authorized Person