	State of Rhode Island	
	State of Rhode Island Department of State - Business Services	Division

FILED

Annual Report for the year: $\frac{2020}{}$ **Limited Liability Company**

OCT 2 6 2020

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

					V 1		
Entity ID Number	2. Exact nar	2. Exact name of the Limited Liability Company					
1336248	McCormick	McCormick Home Improvement, LLC					
3. NAICS Code	4. Brief desc	4. Brief description of the character of business conducted in Rhode Island					
Home remodeling							
5. State of Formation							
Rhode Island							
6. Principal Office Address			City	State	Zip		
41 Peeptoad Road			Warwick	RI	02888		
7. Mailing Address of Limite		y and Name or Ti					
Contact Name Kristen A. Mc	:Cormick		Contact Title Manager				
Street Address 41 Peoptoad Road			City Warwick	State RI	Zip 02888		
8. List ALL managers (nam	es and addresses)	of the Limited Lia	bility Company, IF APPLICA	ABLE - DO NOT LIST !	MEMBER\$		
Manager Name Kristen A. McCormick			Manager Name Christopher P. McCormick				
Street Address 41 Pccptoad Road			Street Address 41 Pecptoad Road				
City Warwick	State RI	Zip 02888	City Warwick	State RI	Zip 02888		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
			<u> </u>	Check the box to i	ndicate an attachment		
9. The Resident Agent infor	mation currently of	record with the R	Department of State is acc	curate. Changes require	e filing Form 642.		
Under penalty of perjury, statements, and that all s				ng any accompanyin	g schedules and		
Name of Authorized Person					Date		
Kristen A. McCormick, Ma	10.13	220					
Signature of Authorized Per							

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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