	State of Rhode Office of the Secret		ate	Fee: \$50.00
	Division Of Busines 148 W. River S			
HOPE	Providence RI 029 (401) 222-30			
Limited Liability Com Annual Report Filing Period: September 1 -				
	7-16-66(d), each limited liability con n thirty (30) days after the time pres penalty fee of \$25.00.			
ANNUAL REPORT YEAR:	2020			
1. ID No. <u>001696009</u>				
2. Exact Name of the Limited Liability Company FISKARS LIVING US, LLC				
3. State of Formation				
State: <u>DE</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>423990</u>				
4. Brief Description of the	e Character of the Business Whic	h is Actua	lly Conducted	in Rhode Island
LUXURY HOME GOOI	<u>DS</u>			
5. Principal Office Addres	ŝS			
No. and Street:1330City or Town:WALI	<u>CAMPUS PARKWAY</u>	tate: <u>NJ</u>	Zip: <u>07753</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: Contact No. and Street: 1330 (Fitle: CAMPUS PARKWAY			
City or Town: WALL		ate: <u>NJ</u>	Zip: <u>07753</u>	Country: USA
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS				
Title	Individual Name First, Middle, Last, Suffix	Addross	Addre	ess ate, Zip Code, Country
	First, Wildule, Last, Sullix	Audress	, ony of Town, Sta	are, Zip Gode, Gounity
8. RESIDENT AGENT IN R	HODE ISLAND - DO NOT ALTER			

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK, RI 02888

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

Signed this 30 Day of October, 2020 at 1:24:43 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 <u>ROBERT T. CARROLL</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2020 State of Rhode Island All Rights Reserved