	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business	Services	
	148 W. River St		
	Providence RI 0290	4-2615	
HOPE	(401) 222-304	10	
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability comp in thirty (30) days after the time presci penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2020</u>		
1. ID No. <u>001696502</u>			
2. Exact Name of the Limited Liability Company $LA 70 BAR AND GRILL LLC$			
3. State of Formation			
State: <u>RI</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>722410</u>			
4. Brief Description of th	e Character of the Business Which	is Actually Conducte	d in Rhode Island
BAR AND GRILL			
5. Principal Office Addre	SS		
No. and Street: 855	BROAD STREET		
	NTRAL FALLS State:	<u>RI</u> Zip: <u>02863</u>	Country: <u>USA</u>
6. Mailing Address of Li	mited Liability Company and Name	or Title of Contact Pe	erson:
Contact Name: NATALIA	LOPERA Contact Title:		
	BROAD ST		
City or Town: <u>CE</u>	NTRAL FALLS State: <u>RI</u>	Zip: <u>02863</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Addr	ess
	First, Middle, Last, Suffix	Address, City or Town, S	tate, Zip Code, Country
8. RESIDENT AGENT IN F	RHODE ISLAND - DO NOT ALTER		

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

NATALIA LOPERA S 855 BROAD STREET CENTRAL FALLS , RI 02863

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 2:58:46 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>NATALIA LOPERA</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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