	State of Rhode I Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River St		
	Providence RI 0290		
HOPE	(401) 222-304	0	
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability comp in thirty (30) days after the time prescr penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	2020		
<b>1. ID No.</b> <u>001657130</u>	<u>)</u>		
2. Exact Name of the Limited Liability Company MANGIA WITH MICHELINE, LLC			
3. State of Formation			
State: <u>RI</u>			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.			
<u>999999</u>			
4. Brief Description of th	e Character of the Business Which	is Actually Conducted i	n Rhode Island
I AM AN AUTHOR OF	F A COOKBOOK AND I SELL N	IY COOKBOOK	
5. Principal Office Addre	SS		
No. and Street: 117	CENTRAL PIKE		
	RTH SCITUATE State: E	<u>AI</u> Zip: <u>02857</u> C	Country: <u>USA</u>
6. Mailing Address of Li	mited Liability Company and Name	or Title of Contact Pers	on:
Contact Name: MICHEL	INE LOMBARDI Contact Title: AUTH	IOR	
	BOX 950		
City or Town: <u>NO</u>	RTH SCITUATE State: <u>RI</u>	Zip: <u>02857</u> Co	ountry: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Addres	s
	First, Middle, Last, Suffix	Address, City or Town, State	e, 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

MICHELINE G LOMBARDI 117 CENTRAL PIKE NORTH SCITUATE , RI 02857

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

**Signed this 1 Day of November, 2020 at 11:02:24 AM 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 MICHELINE LOMBARDI

Signature of Authorized Person

Form No. 632 Revised 09/07

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