	State of Rhode	lolond	Ε Φ.50.00
	Office of the Secreta		Fee: \$50.00
Division Of Business Services			
148 W. River Street Providence RI 02904-2615			
(401) 222-3040			
Limited Liability Company Annual Report Filing Period: September 1 - November 1			
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.			
ANNUAL REPORT YEAR: 2020			
1. ID No. <u>001015111</u>			
2. Exact Name of the Limited Liability Company <u>TURIN DESIGN & DEVELOPMENT LLC</u>			
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 here. More information on NAICS can be found online.			
<u>541430</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
DESIGN & DEVELOPMENT CONSULTATION			
5. Principal Office Address			
No. and Street: <u>400 PUTNAM PIKE</u>			
SUITE D250 City or Town: SMITHFIELD State: RI Zip: 02917 Country: USA			
City or Town: <u>SM</u>	TINFIELD State:]	<u>RI</u> Zip: <u>02917</u> Country	: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title: No. and Street: 400 PUTNAM PIKE, SUITE D #250			
City or Town: SMITHFIELD State: RI Zip: 02917 Country: USA			
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Co	ode, Country

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

KAS DECARVALHO NORTHWOODS OFFICE PARK SUITE 215 N 1301 ATWOOD AVENUE JOHNSTON , RI 02919

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 2:53:27 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 ARTISS AKARRA

Signature of Authorized Person

Form No. 632 Revised 09/07

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