	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River S		
HOPE	Providence RI 0290 (401) 222-304		
Limited Liability Com Annual Report Filing Period: September 1			
In accordance with R.I.G.L.	7-16-66(d), each limited liability comp in thirty (30) days after the time presc		
ANNUAL REPORT YEAR:	<u>2020</u>		
1. ID No. <u>001696180</u>			
2. Exact Name of the Limited Liability Company Big Dreamz LLC			
3. State of Formation			
State: <u>RI</u>			
the list of codes here. Mor	Code that best describes the primary e information on <u>NAICS</u> can be found	-	the entity. Download
<u>531110</u>			
4. Brief Description of th	e Character of the Business Which	is Actually Conducte	ed in Rhode Island
OWN AND MANAGE	REAL ESTATE		
5. Principal Office Addre	SS		
	WALCOTT STREET VTUCKET Stat	e: <u>RI</u> Zip: <u>02860</u>	Country: <u>USA</u>
6. Mailing Address of Li	mited Liability Company and Name	e or Title of Contact P	erson:
No. and Street: 299 V	AFFIN Contact Title: WALCOTT STREET		0 / 1104
City or Town: PAW	TUCKET State	e: <u>RI</u> Zip: <u>02860</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	Add	
	First, Middle, Last, Suffix	Address, City or Town, S	state, Zip Code, Country
	RHODE ISLAND - DO NOT ALTER		
O. RESIDENT AGENT IN	NIODE ISLAND - DO NUT ALTER		

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

MICHAEL GAFFIN 299 WALCOTT STREET PAWTUCKET, RI 02860

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

Signed this 2 Day of November, 2020 at 8:46:54 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 JEFF GAFFIN

Signature of Authorized Person

Form No. 632 Revised 09/07

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