RI SOS Filing Number: 202072290910 Date: 11/2/2020 4:00:00 PM



## **Department of State - Business Services Division**

## Annual Report for the year: 2020 Limited Liability Company

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

ightharpoonup Penalty: Additional \$25.00 fee if form is not filed by December 1.

FILED	
NOV 0 2 2020 31	

1. Entity ID Number 000129637	2. Exact name of the Limited Liability Company LOU POLSENO & SON, LLC					
3. NAICS Code 238910	Brief description of the character of business conducted in Rhode Island     LANDSCAPING & GROUNDWORK FOR CONSTRUCTION					
5. State of Formation RI						
6. Principal Office Address 661 HARTFORD PIKE			City NORTH SCITUATE	State RI	Zip 02857-1252	
7. Mailing Address of Limited Lia		and Name or Title	of Contact Person			
Contact Name LOUIS POLSENO			Contact Title PRESIDENT/OWNER			
Street Address 661 HARTFORD PIKE			City NORTH SCITUATE	State RI	<sup>Zip</sup> 02857-1252	
8. List ALL managers (names ar		f the Limited Liabil	ity Company, IF APPLICABLE	- DO NOT LIST N	IEMBERS	
Manager Name LOUIS POLSENO			Manager Name N/A			
Street Address 661 HARTFORD PIKE			Street Address			
City NORTH SCITUATE	State RI	Zip 02857-1252	City	State	Zip	
Manager Name N/A			Manager Name N/A			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	1		C	heck the box to in	ndicate an attachment	
9. The Resident Agent information	on currently of re	ecord with the RID	epartment of State is accurate	. Changes require	filing Form 642.	
Under penalty of perjury, I dec statements, and that all staten	iare and affirm nents containe	that I have exam d herein are true	Ined this report, including an and correct.	y accompanying	schedules and	
Name of Authorized Person				Date	Date	
LOUIS POLSENO					10/05/2020	
Signature of Authorized Person						

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov