



State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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Annual Report for the year: 2015
Limited Liability Company

2020 OCT -7 PM 2:43

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number <u>164612</u> <u>1164612</u>		2. Exact name of the Limited Liability Company <u>Jackies Loft LLC</u>	
3. NAICS Code <u>448120</u>		4. Brief description of the character of business conducted in Rhode Island <u>Retail / womens clothing Boutique</u>	
5. State of Formation <u>RI</u>			
6. Principal Office Address <u>448 Thames St</u>		City <u>Bristol</u>	State <u>RI</u>
		Zip <u>02809</u>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>Jacqueline Carroll</u>		Contact Title <u>owner</u>	
Street Address <u>448 Thames St</u>		City <u>Bristol</u>	State <u>RI</u>
		Zip <u>02809</u>	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name <u>Jacqueline Carroll</u>		Manager Name	
Street Address <u>80 Boyce Ave</u>		Street Address	
City <u>Barrington</u>	State <u>RI</u>	Zip <u>02806</u>	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	
City		State	
State		Zip	
Check the box to indicate an attachment <input type="checkbox"/>			
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.			
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.			
Name of Authorized Person <u>Jacqueline Carroll</u>		Date <u>9-12-2020</u>	
Signature of Authorized Person <u>Jacqueline Carroll</u>			

MAIL TO:
 Division of Business Services
 148 W River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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