State of Rhode Island Department of State - Business Services Division	· -
Annual Report for the year: 2020 Limited Liability Company	FILED NOV 0 2 2020
<ul> <li>→ Filing period: September 1 - November 1</li> <li>→ Filing Fee: \$50.00</li> <li>→ Penalty: Additional \$25.00 fee if form is not filed by December 1.</li> </ul>	7v 1106

1. Entity ID Number	2. Exact name of the Limited Liability Company						
1654228	ZELOU, LLC						
3 NAICS Code 531120	4. Brief description of the character of business conducted in Rhode Island Own and manage real estate						
5. State of Formation RI							
6. Principal Office Address 325 Metacom Avenue		City Bristol		State RI	Zip 02809		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Klaus Kutter	Contact Title Member						
Street Address 325 Metacom Ave	enue		City Bristol		State R1	Zip 02809	
8. List ALL managers (names ar	nd addresses) of	the Limited Liabi	lity Company, IF	APPLICABLE - D	O NOT LIST ME	MBERS	
Manager Name None	Manager Name						
Street Address	Street Address						
City	State	Zıp	City		State	Zıp	
Manager Name None		Manager Name None					
Street Address		Street Address					
City	State	Zıp	City		State	Zip	
Check the box to indicate an attachment							
9. The Resident Agent information currently of record with the RI Department of State is accurate. 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			Date				
Klaus Kutter							
Signature of Authorized Person							

## MAIL TO:

**Division of Business Services** 

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

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