



State of Rhode Island and Providence Plantations  
 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
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

**FILED** **STAMP**  
 NOV 04 2020

1210

1. Entity ID Number 1680474		2. Exact name of the Limited Liability Company Melissa LLC			
3. NAICS Code 531210		4. Brief description of the character of business conducted in Rhode Island  Real Estate Sales Agent			
5. State of Formation RI					
6. Principal Office Address PO Box 6927			City Providence	State RI	Zip 2940
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Melissa Riley			Contact Title Authorized Representative		
Street Address PO Box 6927			City Providence	State RI	Zip 2940
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	zip	City	State	Zip
Check the box to indicate an attachment					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
<i>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.</i>					
Name of Authorized Person  Melissa Riley Authorized Member				Date OCT 30 2020	
Signature of Authorized Person  				SIGN DOCUMENT I HERE	

MAIL TO:  
 Division of Business Services  
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 Website: www.sos.ri.gov