

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.

1. Entity ID Number 001060091	2. Exact na		ed Liability Company			
3. NAICS Code			haracter of husiness conductor	t in Phode Island		
722410		4. Brief description of the character of business conducted in Rhode Island Hookah Lounge				
5. State of Formation		, cg.	÷		•	
Rhode Island					·.	
6. Principal Office Address	 i		City	State	Zip	
55 Douglas Pike, Suite 103			Smithfield	RI	02917	
7. Mailing Address of Limit	ted Liability Compa	ny and Name o	r Title of Contact Person	<u> </u>	<u> </u>	
Contact Name Raymond Fren			Contact Title Member			
Street Address 2 Marthas Way			City Franklin	State MA	Zip 02038	
8. List ALL managers (nar	mes and addresses	s) of the Limited	Liability Company, IF APPLICA	ABLE - 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	Zıp	City	State	Zip	
·	<u>_</u>			Check the box to	indicate an attachment	
9. Resident Agent in Rhod	le Island. This inform	nation is currently	of record with the Department of S	tate. Changes require fili	ng Farm 642.	
Under penalty of perjury statements, and that all	r, i declare and aff statements conta	irm that I have ined herein are	examined this report, include true and correct.	ing any accompanyin	g schedules and	
Name of Authorized Person				Date		
Raymond Fren						

SIGN DOCUMENT HERE

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FILED

MAIL TO:

Division of Business Services

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

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