RI SOS Filing Number: 202073360540 Date: 11/4/2020 4:00:00 PM

State of Rhode Island

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

**FILED** 

Annual Report for the year: 2020

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.

	NOV 0 4 2020
BY_	138
	(2)

1. Entity ID Number	2. Exact name of the Limited Liability Company					
001694168	COLM123, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
722410	OPERATING A HOOKAH SPORTS BAR					
5. State of Formation	7					
RI						
6. Principal Office Address			City	State	Zip	
584 SMITHFIELD AVENUE			PAWTUCKET	RI	02860	
7. Mailing Address of Limited Li		any and Name or				
Contact Name GERARDO ACUNO			Contact Title MEMBER			
Street Address 584 SMITHFIELD AVENUE			City PAWTUCKET	State RI	<sup>Zip</sup> 02860	
8. List ALL managers (names a	nd addresse:	s) of the Limited	Liability Company, IF APPLICABL	E - DO NOT LIST I	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
		, <u> </u>		Check the box to i	ndicate an attachment	
9. The Resident Agent informati	on currently o	of record with the	RI Department of State is accura	ete. Changes require	e filing Form 642.	
Under penalty of perjury, I dea statements, and that all states			examined this report, including true and correct.	any accompanyin	g schedules and	
Name of Authorized Person				Date		
GERARDO ACUN <b>A</b>				10-	10-2020	
Signature of Authorized Person	6.1	in-	bu			

MAIL TO:

**Division of Business Services** 

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

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