



FILED

Annual Report for the year: <u>2020</u> **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	1 0 2020
BY	8131 ₀ 5

Entity ID Number	2. Exact name of the Limited Liability Company						
000117437	Linosley MASONRY. !!						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
838140	PATIOS, WALLS, FIREPLACES etc.						
5. State of Formation							
RL							
6. Principal Office Address			City	State	Zip		
14 MERDOW LANC			NARRAGAMENT	RI	05885		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
FRED LINDS EV			Contact Title OW Nex				
Street Address IH MEROW LANC			NACRAGENTETT	State	Zib 05885		
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	Zıp		
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							
FRED Linosley 11/4/2020							
Signature of Authorized Person							
Lobin Rut							
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MAIL TO:

Division of Business Services

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

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