



State of Rhode Island and Providence Plantations  
**Department of State - Business Services Division**

FILED A. P

Annual Report for the year: 2020  
 Limited Liability Company

NOV 12 2020

- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

BY 13006  
*OS*

1. Entity ID Number <b>001335418</b>		2. Exact name of the Limited Liability Company <b>MYSTIC RIVER PAINTWORKS, LLC</b>			
3. NAICS Code <b>238230</b>		4. Brief description of the character of business conducted in Rhode Island <b>Residential Painting Services</b>			
5. State of Formation <b>Connecticut</b>					
6. Principal Office Address <b>31 Water Street, 2nd Floor</b>			City <b>Mystic</b>	State <b>CT</b>	Zip <b>06355</b>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <b>Alix Stanley</b>			Contact Title <b>Owner</b>		
Street Address <b>PO Box 322</b>			City <b>West Mystic</b>	State <b>CT</b>	Zip <b>06388</b>
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name <b>Alix Stanley</b>			Manager Name		
Street Address <b>PO Box 322</b>			Street Address		
City <b>West Mystic</b>	State <b>CT</b>	Zip <b>06388</b>	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
<b>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.</b>					
Name of Authorized Person <i>Alix H. Stanley</i>				Date <i>11/5/2020</i>	
Signature of Authorized Person <i>Alix H. Stanley</i>				SIGN DOCUMENT HERE	

**MAIL TO:**  
 Division of Business Services  
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