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.

					(A)	
Entity ID Number	2. Exact na	2. Exact name of the Limited Liability Company				
001661591	Graceke D	Graceke Design, LLC				
3. NAICS Code	4. Brief des	4. Brief description of the character of business conducted in Rhode Island				
541410	Interior de	Interior design				
5. State of Formation		•				
Rhode Island						
6. Principal Office Address	<u> </u>		City	State	Zip	
22 Sextant Lane			Narragansett	RI	02882	
7. Mailing Address of Limit		any and Name o		•		
Contact Name Kristen Martone			Contact Title Member			
Street Address 22 Sextant Lane			City Narragansett	State RI	Zip 02882	
8. List ALL managers (nam	nes and addresse	s) of the Limited	Liability Company, IF APPLICAB	BLE - 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	
	J	1	<del></del>	Check the box to	indicate an attachment	
9. The Resident Agent info	rmation currently	of record with th	e RI Department of State is accur	rate. Changes requir	e filing Form 642.	
Under penalty of perjury, statements, and that all s			examined this report, including true and correct.	g any accompanyir	ng schedules and	
Name of Authorized Person				Date		
Kristen Martone				20 .2021		
Signature of Authorized Pe	erson	Mau	the			

MAIL TO:

Division of Business Services

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

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

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FORM 632 - Revised: 08/2020