



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

FILED

FEB 17 2021

BY 037532

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Annual Report for the year: 2021
Corporation

- Filing period: January 1 - March 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by April 1.

1. Entity ID Number 001667900		2. Exact name of the Corporation ARLIN Mfg. Co., Inc.			
3. Principal Office Address 239 Industrial Avenue East			City Lowell	State MA	Zip 01852
4. NAICS Code 326100		6. Brief description of the character of business conducted in Rhode Island Manufacturer of Plastic Films			
5. State of Incorporation MA					
7. List ALL officers (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
President Name John R. Mitchell			Vice-President Name Steven D. Mitchell		
Street Address 239 Industrial Avenue East			Street Address 239 Industrial Avenue East		
City Lowell	State MA	Zip 01852	City Lowell	State MA	Zip 01852
Secretary Name Paul R. Mitchell			Treasurer Name Paul R. Mitchell		
Street Address 239 Industrial Avenue East			Street Address 239 Industrial Avenue East		
City Lowell	State MA	Zip 01852	City Lowell	State MA	Zip 01852
8. List ALL directors (names and addresses) Check the box to indicate an attachment <input type="checkbox"/>					
Director Name John R. Mitchell			Director Name Paul R. Mitchell		
Street Address 239 Industrial Avenue East			Street Address 239 Industrial Avenue East		
City Lowell	State MA	Zip 01852	City Lowell	State MA	Zip 01852
Director Name Steven D. Mitchell			Director Name		
Street Address 239 Industrial Avenue East			Street Address		
City Lowell	State MA	Zip 01852	City	State	Zip
9. Shares Authorized		10. Shares Issued Check the box to indicate an attachment <input type="checkbox"/>			
This information is currently of record in the Department of State. Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		9,000			\$0.0000
11. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.					
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 Representative John R. Mitchell				Date 1/28/2021	
Signature of Authorized Representative 				PRINT DOCUMENT HERE	

MAIL TO:
 Division of Business Services
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