State of Rhode Islan Department of		usiness Servi	ces Division	_	
Annual Report for the year: 2019 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.				2021 FEB 19 1A	RECEIVED R.I. DEPT. OF ST
1. Entity ID Number	2 Exact o	2. Exact name of the Limited Liability Company			<u> </u>
00/6810 48 3. NAICS Code	_ BAI	Mugton	Butchery LL		m T
445210 5. State of Formation RT			aracter of business conducted in Rh.		11810WS
6. Principal Office Address 38 D County Rd 7. Mailing Address of Limited Liability Company and Name or			Barrington	State	D2806
Contact Marie		any and Name or T			
MIKE MEKE	ever		Contact Title OWNCR		
Street Admit Peace Sit			City Aruse A	State	Zip 02888
8. List ALL managers (names	and addresse	s) of the Limited Li	ability Company, IF APPLICABLE -	DO NOT LIST MI	EMBERS
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name	1	<u> </u>
Street Address			Street Address		
City	State	Zip	City	State	Zip
			Che	ck the box to ind	licate an attachment
9. The Resident Agent informa	ition currently o	of record with the R	RI Department of State is accurate. C	hannes require f	iling Form 642
statements, and that all state	eciare and aff	irm that I have ex.	amined this report including and	accompanying :	schedules and
Name of Authorized Person					
LAWIENCE 1	KUS501	IND		02/18	121 .
Signature ()Authorized Person	Russe	les			· · · · · · · · · · · · · · · · · · ·

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 Phone: (401) 222-3040

Website: www.sos.n.gov

FILED

FEB 1 9 2021

FORM 632 - Revised: 08/2020 9.'40