RI SOS Filing Number: 202193642630 Date: 3/5/2021 4:00:00 PM

State of Rhode Island

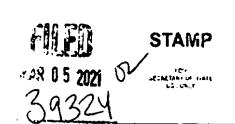
## Department of State - Business Services Division

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.



1. Entity ID Number	2 Exact na	2. Exact name of the Limited Liability Company				
522122		Eyecitemendia, LLC				
3. NAICS Code 541519 5. State of Formation RI	4. Brief description of the character of business conducted in Rhode Island Website development					
6. Principal Office Address 16 WARCAM WAY			City Portsmouth	State RI	Z <sub>1</sub> p 02871	
7. Mailing Address of Limited Li	ability Compar	ny and Name o	r Title of Contact Person			
Contact Name J. Russell Jackson				Contact Tiffe Registered Agent		
Street Address 122 Tourn Street			City Newport	State RI	<sup>Zip</sup> 02840	
8. List ALL managers (names a	and addresses	) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Ζφ	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zıp	
				Check the box to	indicate an attachment	
9. The Resident Agent informat	on currently o	f record with the	e RI Department of State is acc			
Under penalty of perjury, I de statements, and that all state	clare and affi	m that I have	examined this report, includi			
Name of Authorized Person  Richard A. auntal  Signature of Authorized Person				Date 2/26/2	Date 2/26/21	
Signature of Authorized Person	For	<u> </u>		<u> </u>		

i

## MAIL TO:

**Division of Business Services** 

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

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