

## **Department of State - Business Services Division**

R.I. DEPT. OF STATE BUS SVCS DIV 2021 JAN -4 PM 12: 59

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

1. Entity ID Number	Jo F					
1686648	Exact name of the Limited Liability Company     Pot People LLC					
3. NAICS Code						
511199		4. Brief description of the character of business conducted in Rhode Island				
5. State of Formation	should be	No business was ever conducted (company was initially setup in error with wrong business name, and should have been dissolved 2 yrs ago.				
RI	, should ha	should have been dissolved 2 yrs ago.				
6. Principal Office Address			City	State	JZip 75 ₹	
17 Robbins Drive			Barrington	RI	Ψ <sub>02806</sub> <u>Υ</u> Ξ	
7. Mailing Address of Limited	Liability Comp	any and Name or Titl	e of Contact Person			
Contact Name Andrew Tolley			Contact Title Member			
Street Address 17 Robbins Drive			City Barrington	State RI	Zip 02806	
8. List ALL managers (names	and addresse	s) of the Limited Liab	oility Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS	
Manager Name	1	···	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	Zip	
				Check the box to	indicate an attachment	
9. The Resident Agent informa	ation currently of	of record with the RI i	Department of State is accu	rate Changes requir	e filing Form 642	
Under penalty of perjury, I d statements, and that all stat	eciare and aff	irm that I have even	ninad this report includi-	g any accompanyin	g schedules and	
Name of Authorized Person				Date		
Andrew Tolley				Dec 11, 2020		
Signature of Authorized Person	n					

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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BY # 7HKC5
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