



State of Rhode Island
Department of State - Business Services Division

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BUS SVCS DIV

2021 FEB 17 PM 12:20

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 1701501		2. Exact name of the Limited Liability Company Kevin W PLATT AND ASSOCIATES LLC	
3. NAICS Code 561110		4. Brief description of the character of business conducted in Rhode Island To engage in BUSINESS AND PRODUCTION CONSULTATION	
5. State of Formation RI			
6. Principal Office Address 34 Hamden Rd		City CRANSTON	State RI
		Zip 02920	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Kevin W PLATT		Contact Title Member	
Street Address 34 Hamden Rd		City CRANSTON	State RI
		Zip 02920	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name Kevin W Platt, II		Manager Name	
Street Address 34 Hamden Road		Street Address	
City Cranston	State RI	Zip 02920	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	Zip	
Name of Authorized Person Kevin W PLATT		Date 12-4-20	
Signature of Authorized Person <i>Kevin W Platt</i>			

Check the box to indicate an attachment

9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642

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.

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

MAR 31 2021
BY *UTOV3*
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