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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

31.

Annual Report for the year: 2019 **Limited Liability Company**

ightarrow Filing period: September 1 - November 1

→ Filing Fee: \$50.00

-> Penalty: Additional \$25.00 fee if form is not filed by December 1.

R.I. DEPT. OF STATE BUS SVCS DIV					
2021 APR -5 AM 9: 20					
9: 20					

1. Entity ID Number 000154321	1	Z. Exact name of the Limited Liability Company Kenton Athletics, LLC				
3. NAICS Code 446120	I	Brief description of the character of business conducted in Rhode Island Bodycare products for athletes (distributor of products manufactured by a third-party)				
5. State of Formation						
6. Principal Office Address	ı		City	State	Zip	
47 Squaw Sachem Trl			Concord	MA	01742	
7. Mailing Address of Limited	Liability Compa	any and Name o		1		
Contact Name Kenton Shirk			Contact Title Director	Contact Title Director		
Street Address 47 Squaw Sachem Trl			City Concord	State MA	Ζ ^{ιρ} 01742	
8. List ALL managers (names	s and addresse	s) of the Limited	Liability Company, IF APPLICA	ABLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name		. <u> </u>	Manager Name	I		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
<u> </u>		ı		Check the box to	indicate an attachment	
3. Resident Agent in Rhode Is	sland. This infor	nation is currently	of record with the Department of S	tate. Changes require filir	ng Form 642.	
Under penalty of perjury, I o statements, and that all sta			examined this report, includi true and correct.	ng any accompanyin	g schedules and	
Name of Authorized Person				Date		
Kenton M. Shirk				4/2/2021		
Signature of Authorized Perso	on Ku	et Mi	NEW JUNEAU HERE	,		

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**

APR 05 2021

FORM 632 - Revised: 10/2017