

State of Rhode Island

Department of State - Business Services Division

RECEIVED -R.I. DEPT. OF STATE BUS SVCS DIV

2021 APR -6 PM 3: 39

- → 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 name of the Limited Liability Company				
001700523	LAFAZIA DESIGN AND CONTRACTING LC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
237310					
5. State of Formation		_	•		
RI.	WOODWORKING				
6. Principal Office Address			City	State	Zip
6. Principal Office Address 192 Wash ING TON AVE			PROVIDENCE	RI	02905
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name VINCENT Lafazia			Contact Title		
Street Address 33 Acokn 57			City PRWIDERCE	State RI	Zip 2903
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			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 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.					
Name of Authorized Person Date / 4					
VINCENT LA JAZIA 4/4/21 Signature of Authorized Person)					
Signature of Authorized Person					
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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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FORM 632 - Revised: 08/2020