RI SOS Filing Number: 202100883060 Date: 9/2/2021 3:12:00 PM



State of Rhode Island

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

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2021 SEP -2 PM 3: 10 FOR USE ONLY

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

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

[	T .				
1. Entity ID Number	2. Exact name of the Limited Liability Company				
001696162	314 LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
311991	Food production				
5. State of Formation		1			
6. Principal Office Address		, <u>.</u>	City	State ,	Zip
290 WASKI Rd			Perrilville	le1	02830
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name STRUUN D'ANDIUM			Contact Title		
Street Address WAK, Rd			Burniville	State	<sup>Zip</sup> UZ830
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name ) Andru			Manager Name		
Street Andress DAKi			Street Address		
Buraballe	State	Zip 2890	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 Penson Date					
Stem D'Andren 1SEPT21					
Signature of Authorized Person					
(fill)					

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

