RI SOS Filing Number: 202101817730 Date: 9/20/2021 12:50:00 PM



State of Rhode Island

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

Annual Report for the year: 1020 Limited Liability Company

R.I. DEPT. OF STATE BUS SVCS DIV

· 2021 AUG 26 PH 4: 17

→ 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 na	2. Exact name of the Limited Liability Company				
1687903	Total	Totalboat LLC				
3. NAICS Code	4. Brief description of the character of business, conducted in Rhode Island					
999999	Sold book 15 our own brand name on our production with the compumers which is done through fancour Dustributors. To hegaly elmost Jameston Lustribus					
5. State of Formation	THE TO	Commune	3 WINCH IS	sirce fillow	N Abush	
RI	Destrib	outors. To	hegally klmi	NI Januator	n Histillauri	
6. Principal Office Address  Peckham			Bastol	State	02809	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Richael Mills			Contact Title Prisident Towner			
Street Address PCK LIAIS	Dr.		City Brastal	State	Zip 2809	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name Mills			Manager Name			
Street Address PUCHUM	DRIVE		Street Address			
City BRISTA	Stafe	Zip 02809	City	State	Zip	
Manager Name			Manager Name		R.I. B 121 S	
Street Address			Street Address	<u> </u>	REG DEPT S SU P 20	
City	State	Zıp	City	State	Zip Contains	
Check the box to indicate an artis						
9. The Resident Agent informa	tion currently	of record with the RI	Department of State is ac	curate. Changes require	filing-Form 642.	
Under penalty of perjury, I de statements, and that all state				ing any accompanying	schedules and	
Name of Authorized Person	<del></del>		Date	′ 1		
Michael	Mills			8/	4/21	
Signature of Authorized Person						
	/					

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