RI SOS Filing Number: 202102478570 Date: 10/1/2021 12:14:00 PM State of Rhode Island and Providence Plantations Department of State - Business Services Division Annual Report for the year: **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 2. Exact name of the Limited Liability Company 3. NAICS Code 4. Brief description of the character of business conducted in Rhode Island 238140 sonry-wolways, freplaces, 5. State of Formation 6. Principal Office Address City State 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Title Street-Add 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 C:ty State Ζiρ Zip City State Manager Name Manager Name Street Address Street Address City State Zip Zip C ty State Check the box to indicate an attachment 9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. 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 Signature of Authorized Person

FILED 12:1

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov OCT 01 2021 BY QB QQ3VE