



State of Rhode Island  
**Department of State - Business Services Division**

Annual Report for the year: 2021  
**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.

**FILED**  
 OCT 04 2021  
 BY [Signature]

1. Entity ID Number <b>1669151</b>		2. Exact name of the Limited Liability Company <b>Line, LLC</b>					
3. NAICS Code 531390		4. Brief description of the character of business conducted in Rhode Island Creation, development, consulting and editing of digital media					
5. State of Formation RI							
6. Principal Office Address 111 Governor Street				City Providence	State RI	Zip 02906	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Daniel Cohen				Contact Title Member			
Street Address 111 Governor Street				City Providence	State RI	Zip 02906	
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 <input type="checkbox"/>							
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.							
<i>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.</i>							
Name of Authorized Person Daniel Cohen					Date 9/21/2021		
Signature of Authorized Person <u>[Signature]</u>					9/21/2021		

**MAIL TO:**  
 Division of Business Services  
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