

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.

R.I. DEPT. OF STATE BUS SYCS DIV
2021 NOV 26 PM 3: 22

1. Entity ID Number	i i	2. Exact name of the Limited Liability Company				
106330	Zargo, Li	Zargo, LLC				
3. NAICS Code	4. Brief desc	4. Brief description of the character of business conducted in Rhode Island				
531390	Investment	Investments				
5. State of Formation						
Rhode Island						
6. Principal Office Address			City	State	Zip	
303 Allens Avenue			Providence	RI	02905	
7. Mailing Address of Limited		iy and Name or Tit				
Contact Name Ellis Waldman			Contact Title Manager			
Street Address 303 Allens Avenue			City Providence	State RI	^{Zip} 02905	
8. List ALL managers (name		of the Limited Lia	bility Company, IF APPLICAE	BLE - DO NOT LIST (MEMBERS	
Manager Name Ellis Waldman			Manager Name			
Street Address 303 Allens Avenue			Street Address			
City Providence	State RI	^{Zip} 02905	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
· · · · · · · · · · · · · · · · · · ·	<u> </u>	I		Check the box to i	indicate an attachment	
9. The Resident Agent inform	nation currently of	record with the RI	Department of State is accu	rate. Changes requir	e filing Form 642.	
Under penalty of perjury, I statements, and that all sta				g any accompanyin	g schedules and	
Name of Authorized Person				Date		
Ellis Waldman				11/24/71		
Signature of Authorized Pers	_					

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov

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