RI SOS Filing Number: 202105614830 Date: 12/1/2021 4:00:00 PM



State of Rhode Island

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

Annual Report for the year: \_\_2o2#

**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.

COF STATE
27KT0 77
O A.E.
SACO CIA

2021 DEC -1 AH 8: 59

Entity ID Number	2. Exact na	2. Exact name of the Limited Liability Company					
1712628	888	+ 888 Restaurant LLC					
3. NAICS Code	4. Brief des	4. Brief description of the character of business conducted in Rhode Island					
722511	Res	Restaurant					
5. State of Formation		·					
R1							
6. Principal Office Address	1		City	State	Zip		
3351 Fas			Portsmons	R RI	02871	_	
7 Mailing Address of Limit	ed Liability Compa	ny and Name or T	<del></del>				
Contact Name Vulin Zhan			Contact Title				
Street Address 3351	East 11	Main RI	City Portsmon	H State RZ	Zip 02-871		
8. List ALL managers (nar	nes and addresses	s) of the Limited Lia	ability Company, IF APPLICAB	BLE - DO NOT LIST I	MEMBERS		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address				
City	State	Zip	City	State	Zıp		
Manager Name	·····	<u> </u>	Manager Name	1			
Street Address			Street Address				
City	State	Zip	City	State	Zıp		
				Check the box to i	ndicate an attachment		
9. The Resident Agent info	rmation currently o	of record with the F	RI Department of State is accu	rate. Changes require	e filing Form 642.		
Under penalty of perjury statements, and that all s	, i declare and affi statements contai	irm that I have ex ined herein are tri	amined this report, includingue and correct.	g any accompanyin	g schedules and		
Name of Authorized Person				Date			
Vulin Dan-				12/	1/2021		
Signature of Authorized Pe	erson	, · <sub>1</sub> ,	······	<del></del>			
			<del></del>				
			····	<u></u>		_	
and the same of th							

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

FORM 632 - Revised: 08/2020