



**State of Rhode Island
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2021

1. ID No. 001704084

2. Exact Name of the Limited Liability Company Fundati Holdings, LLC

3. State of Formation

State: RI

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

722513

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

WE ARE A SPECIALITY COFFEE SHOP, CAFE AND COFFEE ROASTERY. WE BREW AND SERVE FRESH COFFEE, TEAS, ESPRESSO BEVERAGES, ALONG WITH FRESH BAKED GOODS, AND QUICK MADE TO ORDER BREAKFAST AND LUNCH SANDWICHES. WE ALSO HAVE A LIQUOR LICENSE THAT WE USE ON LIMITED OCCASIONS TO PRIMARILY SERVE SOME ALCOHOLIC COFFEE BEVERAGES. WE SELL RETAIL PRODUCTS FOR AT HOME COFFEE BREWING ALONG WITH OUR ROASTED BEANS BY THE BAG.

5. Principal Office Address

No. and Street: 1525 OLD LOUISQUISSET PIKE

City or Town: LINCOLN

State: RI Zip: 02865 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: ALICIA DECASTRO Contact Title: OWNER

No. and Street: 1525 OLD LOUISQUISSET PIKE
City or Town: LINCOLN

State: RI Zip: 02865 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	ALICIA DECASTRO	1525 OLD LOUISQUISSET PIKE LINCOLN, RI 02865 USA
MANAGER	JASON MAGOON	5 FRANCIS AVE. LINCOLN, RI 02865 USA

**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

JASON MAGOON 5 FRANCIS AVENUE LINCOLN , RI 02865

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 22 Day of December, 2021 at 8:23:52 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By ALICIA DECASTRO
Signature of Authorized Person

Form No. 632
Revised 09/07

© 2007 - 2021 State of Rhode Island
All Rights Reserved