RI SOS Filing Number: 202107540470 Date: 12/30/2021 4:00:00 PM

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Department of State - Business Services Division

2021 DEC 30 P 3 17

Annual Report for the year: 20213 **Limited Liability Company** 

STAMP

→ 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					
m m i z i   -	2. Exact name of the Limited Liability Company				
001664728	4 Brief description of the phase to the				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
436118					
5. State of Formation	Building & Design				
KŢ	Jac De Sign				
6. Principal Office Address	<u> </u>				
570 Broad of			City n	State	Zip
			Mouidace	RI	102907
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person  Contact Name					
			Contact Title		
Street Address			City	Tetato	
8. List ALL managers (names and addresses) - (4) - (4)			comberland	State	798261
Manager Name					
			Manager Name		
Street Address			Street Address		
City State Zin					
	State	Zip	City	State	Zip
Manager Name			Manager Name	<u> </u>	<u></u>
Street Address	$\overline{}$				
			Street Address		
City	State	Zip	City	State	Zip
				State	219
9. The Resident Agent information gurgestly of good with the second street an attachment.					
9. The Resident Agent information currently of record with the RI Department of State is accurate. 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					
MARÍA ROSA TAKUMA					
Signature of Authorized Person					
A forther					
FILED					

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov DEC 3 0 2021

BY Ch WAAE9