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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.

STAMP

1. Entity ID Number <u>001657411</u>		2. Exact name of the Limited Liability Company <u>A. PRIME MARKET, LLC</u>	
3. NAICS Code <u>45411</u>		4. Brief description of the character of business conducted in Rhode Island <u>Online Retail Sales</u>	
5. State of Formation <u>RI</u>			
6. Principal Office Address <u>9 Church St.</u>		City <u>PROVIDENCE</u>	State <u>RI</u> Zip <u>02904</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>Jonathan Mettingly</u>		Contact Title <u>Owner</u>	
Street Address <u>9 Church St.</u>		City <u>Providence</u>	State <u>RI</u> Zip <u>02904</u>
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name <u>[Signature]</u>		Manager Name	
Street Address <u>[Signature]</u>		Street Address	
City <u>[Signature]</u>	State <u>[Signature]</u>	City	State Zip
Manager Name		Manager Name	
Street Address		Street Address	
City	State Zip	City	State Zip
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642. <input type="checkbox"/>			
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 <u>Jonathan Mettingly</u>		Date <u>12/31/21</u>	
Signature of Authorized Person <u>[Signature]</u>			

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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