No Fee

State of Rhode Island
Office of the Secretary of State

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

Domestic Limited Liability Company
Annual Report - Amended

Filing Period: February 1 - May 1

In accordance with R.I.G.L. 7-1.2-1501(e), 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.

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2022

1. ID No. 001741968

2. Exact Name of the Limited Liability Company Willies Place 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 A NATIVE AMERICAN AND AMERICAN FOOD RESTAURANT

5. Principal Office Address

No. and Street: 1283 KINGSTOWN
City or Town: PEACEDALE State: RI Zip: 02879 Country: US

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

Contact Name: WILLIAM JOHNSON Contact Title: OWNER
No. and Street: 1283 KINGSTOWN RD
City or Town: PEACEDALE State: RI Zip: 02879 Country: US

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

WILLIAM JOHNSON 58 HIGH ST WAKEFIELD , RI 02879

Signed this 3 Day of April, 2023 at 1:41:42 PM 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 WILLIAM JOHNSON
Signature of Authorized Person

Form No. 632
Revised 09/07

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