



**State of Rhode Island**  
**Department of State - Business Services Division**

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**Annual Report for the year:** 2019  
**Limited Liability Company**

- Filing period: February 1 - May 1  
 → Filing Fee: \$50.00  
 → Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number <b>001676471</b>		2. Exact name of the Limited Liability Company <b>Grace Upon Grace Boutique LLC</b>	
3. NAICS Code <b>448150</b>		4. Brief description of the character of business conducted in Rhode Island <b>FAMILY CLOTHING, ACCESSORIES</b>	
5. State of Formation <b>RI</b>			
6. Principal Office Address <b>30 Lillian Rd</b>		City <b>Johnston</b>	State <b>RI</b>
Zip <b>02919</b>			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>Paula A. Choquette</b>		Contact Title	
Street Address <b>30 Lillian Rd</b>		City <b>Johnston</b>	State <b>RI</b>
Zip <b>02919</b>			
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. <i>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.</i>			
Name of Authorized Person <b>Paula A. Choquette</b>			Date <b>7/5/2024</b>
Signature of Authorized Person 			

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BY *LAOTS*

**MAIL TO:**

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