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State of Rhode Island

## Department of State - Business Services Division

Annual Report for the year: 2022 Limited Liability Company

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→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

	<u> </u>			
Entity ID Number	2. Exact name of the Limited Liability Company			
001688986	Cypress Creek O&M, LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
221114	Renewable energy operations and maintenance			
5. State of Formation				
Delaware				
6. Principal Office Address		City	State	Zip
3402 Pico Boulevard		Santa Monica	CA	90405
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Marisa Scavo		Contact Title Authorized Person		
Street Address 3402 Pico Boulevard		City Santa Monica	State CA	Zip 90405
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filling 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			Date 3/21/2023	
Marisa Scavo			3/2.	1,2023
Signature of Authorized Person	Mansa Slavo DZE2860826104FA			

FILED

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MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov