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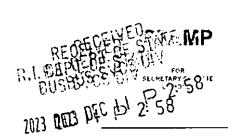
## State of Rhode Island **Department of State - Business Services Division**

Annual Report for the year: 2023 **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	2. Exact name of the Lim	ited Liability Company		
001690656	120 WATER AUDIT LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island  Sales of cloud based software and water testing kits			
561210 —————————				
5. State of Formation				
Indiana				
6. Principal Office Address		City	State	Zip
250 S. Elm Street		Zionsville	IN	46077
7. Mailing Address of Limited	d Liability Company and Name	or Title of Contact Person		
Contact Name Megan Glover		Contact Title President		
Street Address 250 S. Elm Street		City Zionsville	State	<sup>Zip</sup> 46077
8. The Resident Agent inform	nation currently of record with t	the RI Department of State is acc	urate. Changes require	e filing Form 642.
	r, I declare and affirm that I hat a contained herein a	ave examined this report, inclure true and correct.	ding any accompany	ring schedules and
Name of Authorized Person			Date	
Megan Glover			12/11/2021	
Signature of Authorized Pers	Megan Glover	-	<u>.</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