RI SOS Filing Number: 200702942530 Date: 11/23/2007 4:00 PM

State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, *Secretary of State*
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2004

Filing Period: September 1 - November 1 • **Filing Fee:** $50.00

In accordance with R.I.G.L. 7-16-66 (d), 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.

1. ID No.	2. Exact name of the limited liability company
000128612	Double Down, LLC

3. State of Formation	4. Brief description of the character of the business which is actually conducted in Rhode Island
RI	dormant holding company

5. Principal office address	City	State	Zip
c/o Jim Hyman, 11 Memorial Blvd	Newport	RI	02840

6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:

Contact Name	Contact Title
Sevim Perry	CPA

Street Address	City	State	Zip
63 Stevens Drive	Brentwood	NH	03833

7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS
FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☐

Manager Name	Manager Name
Street Address	Street Address
City / State / Zip	City / State / Zip
Manager Name	Manager Name
Street Address	Street Address
City / State / Zip	City / State / Zip

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

Agent Name	Address		
Jim Hyman	11 Memorial Blvd		
Address	City	Zip	
	Newport	RI	

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This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

[redacted] 000128612 [redacted]

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.

Signature of Authorized Person — *Date* 11/04/07

[redacted] Sevim Perry

Print or Type Name of Authorized Person

File Date	FILED
Check No.	NOV 28 2007
By:	By 042914 10:22

FOR SECRETARY OF STATE USE ONLY

16172-8-197264

Form 632 Rev. 07/07