

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 2008

Filing Period: September 1 - November 1 - Filing Fee: \$50.00\* - THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

\* 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. 157567	1	t name of the limited liability company iuys LLC						
3 State of Formation Rhode Island	I Dublia Dalatiana			paracter of the husiness which is actually conducted in Rhode Island				
5. Principal office address 230 Maple Street			City Marlborough	State MA	<i>≱</i> ₽ 01 <b>7</b> 52			
6. MAILING ADD Contact Name Fred Smerlas	RESS OF I	IMITED LIABII	ITY COMPANY AN	D NAME OR TITLE OF CONTAC	T PERSON:			
Street Address 230 Maple Stre	et	-		City: Marlborough	State MA	<i>Ζι</i> ρ 01752		
7. NAME AND AI	DRESS O			ED LIABILITY COMPANY, IF AP ING ATTACHMENTS ("X" BOX I Manager Name				
Street Address				Street Address	Street Address			
City		State	Ζip	City:	State	Zip		
Manager Name				Manager Name				
Street Address			Street Address	Street Address				
8. RESIDENT AG			Zip	City City	State	Zip		
This information is	currently c	or record in the O	ffice of the Secretary	of State. Changes require filing of	Form 642 - R.I.G.L. 7-1	0-11		

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

File Date	FILED	
Check No.	OCT 0 6 2008	
By	By 1000	- 1 1 
	FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjuty, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are trudiand correct.

Signature of Authorized Person

Fred Smerlas

Print or Type Name of Authorized Person