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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 2009

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	2. Exact name of the limited liability company
154709	NAMCO LLC

3. State of Formation	4. Brief description of the character of the business which is actually conducted in Rhode Island
DELAWARE	RETAILER OF HOME LEISURE PRODUCTS

5. Principal office address	City	State	Zip
100 SANRICO DRIVE	MANCHESTER	CT	06040

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

Contact Name	Contact Title
ANABELA CRUZ	VP OF FINANCE

Street Address	City	State	Zip
100 SANRICO DRIVE	MANCHESTER	CT	06040

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	Street Address	City	State	Zip
WHITNEY EQUITY HOLDING CORPORATION	130 MAIN STREET	NEW CANAAN	CT	06840
NORTH AMERICAN MARKETING CORP	100 SANRICO DRIVE	MANCHESTER	CT	06040

8. RESIDENT AGENT IN RHODE ISLAND
This information is currently of record in the Office of the Secretary of State. Changes require filing of Form 642 - R.I.G.L. 7-16-11

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

154709

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.

Anabela Cruz 9/4/09
Signature of Authorized Person *Date*

Anabela Cruz
Print or Type Name of Authorized Person

File Date 9-21-09
Check No. 043383
By: mnc

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38357-8-431842

Form 632 Rev. 08/08