RI SOS Filing Number: 201066991260 Date: 09/07/2010 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 2010

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		
98246	Commo Sealing Products Llc.		
3. State of Formation	4. Brief description of the character of the business which is actually conducted in Rhode Island		
Rhode Island	manufacturing Gaskets		
5. Principal office address	City	State	Zip
258 Woonasquatucket Avenue	North Providence	R.I.	02911

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

Contact Name	Contact Title		
James R. Commo Sr.	President		
Street Address	City	State	Zip
25 Lloyd Avenue	Warwick	R.I.	02889

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
James R. Commo Sr.	Denise R. Commo
Street Address	Street Address
25 Lloyd Avenue	25 Lloyd Avenue
City / State / Zip	City / State / Zip
Warwick / R.I. / 02889	Warwick / R.I. / 02889
Manager Name	Manager Name
Street Address	Street Address
City / State / Zip	City / State / Zip

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).

[redacted]

[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.

James R. Commo Sr. 09/03/2010
Signature of Authorized Person *Date*

James R. Commo Sr. President
Print or Type Name of Authorized Person

[redacted]

File Date FILED
Check No. SEP 07 2010
By: By 4563
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52891-31-458485

Form 632 Rev. 08/08