RI SOS Filing Number: 201179100250 Date: 05/17/2011 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
517042	LGA Dynadec, LLC

3. State of Formation	4. Brief description of the character of the business which is actually conducted in Rhode Island
Rhode Island	Investments

5. Principal office address	City	State	Zip
932 Paseo La Cresta	Palos Verdes Estates	CA	90274

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

Contact Name	Contact Title
Chuck Huebner	Chairman, Board of Managers

Street Address	City	State	Zip
932 Paseo La Cresta	Palos Verdes Estates	CA	90274

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
Chuck Huebner	932 Paseo La Cresta	Palos Verdes Estates	CA	90274
Robert Savoie	16 Reliance Drive	Bristol	RI	02809
Donald Peck	58 North Street	Lexington	MA	02420

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

RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV
2011 MAY 17 PM 2:20

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

[redacted] 517042

FILED
MAY 17 2011
By DS
144593

File Date	
Check No.	
By:	

FOR SECRETARY OF STATE USE ONLY

[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* 5/1/11

[redacted] Chuck Huebner, Manager
Print or Type Name of Authorized Person

Form 632 Rev. 08/08