



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

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

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.

ANNUAL REPORT YEAR: 2013

1. ID No. 000487898

2. Exact Name of the Limited Liability Company Runa, LLC

3. State of Formation

State: RI

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

Managing and developing a supply chain for teas imported from the Ecuadorian Amazon region. Developing bottled beverages based on these teas, and marketing and distributing them in RI and nationally. Within RI, specific work includes product distribution, branding development and communications.

5. Principal Office Address

No. and Street: 33 FLATBUSH AVENUE
SUITE 505

City or Town: BROOKLYN State: NY Zip: 11217 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: DANIEL JACOB MACCOMBIE Contact Title: CO-FOUNDER & CO-CEO

No. and Street: 315 FLATBUSH AVENUE
SUITE 505

City or Town: BROOKLYN State: NY Zip: 11217 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	DANIEL JACOB MACCOMBIE	144 ST MARKS AVENUE 4B BROOKLYN, NY 11217 USA
MANAGER	BILL HARRINGTON	33 FLATBUSH AVE BROOKLYN, NY 11217 USA

MANAGER	BRIAN GOLDBERG	33 FLATBUSH AVE BROOKLYN, NY 11217 USA
MANAGER	TYLER ROGER GAGE	8 MONTEREY TERRACE ORINDA, CA 94563 USA
MANAGER	LUKE WEIL	750 LEXINGTON AVE 25TH FLOOR NEW YORK, NY 10022 USA

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

DEIDRE LONERGAN 128 MAIN STREET WESTERLY , RI 02891

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

Signed this 27 Day of August, 2013 at 2:09:41 PM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By DANIEL J. MACCOMBIE
Signature of Authorized Person

Form No. 632
Revised 09/07

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