

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2013

Filing Period: September 1 - November 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No.		2. Exact name of the limited liability company TIHSON ATM HOLDINGS LLC							
538521	TIHSON								
3. State of Formation	4. Brief desc	4. Brief description of the character of business conducted in Rhode Island							
Rhode Island	making a	making and management of investments							
5. Principal office address 400 Reservoir Avenue, Suite 2H		City Providence	State RI	Zip <b>02907</b>					
6. MARING ADDRESS OF		Y GOMPANY AND N	ME da intere centraci e	i abovi					
Contact Name Craig A. Baker			Contact Title Manager						
Street Address 400 Reservoir Avenue, Suite 2H			City Providence	State RI	Zip <b>02907</b>				
7.4 STAN PANAGERS	(NAMES AND ADI	AESSES) OF THE LE							
Manager Name Craig A. Baker			Manager Name	Manager Name					
Street Address 400 Reservoir Aven	ue		Street Address						
City Providence	State RI	Zip 02907	City	State	Zip				
Manager Name			Manager Name						
Street Address			Street Address	Street Address					
City	State	Zlp	City	State	Zip				
8 RESIDEN AGENTING	HOOE ISLAND								
This information is currer	itly of record in the	e Office of the Secret	ary of State. Changes require t	iling Form 642.					
				<u> </u>					

	FILED	Under penalty of perjury, I declare an		
	SEP 1 1 2013	this report fictuding any accompany and that all statements contained her Signature of Authorized Person		
FOR SECRETARY OF STATE USE ONLY		Craig A. Baker  Print or Type Name of Authorized Perso	<u> </u>	
		Print or Type Name of Authorized Perso	n	

Form No. 632 Revised: 01/2012