



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 2014

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

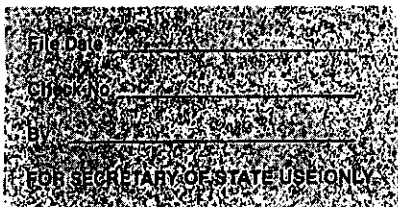
Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE

1. Entity ID No. 000740105		2. Exact name of the limited liability company Startup Investments, LLC			
3. State of Formation Rhode Island		4. Brief description of the character of business conducted in Rhode Island To make investments.			
5. Principal office address 95 Chestnut Street, FL 3		City Providence		State RI	Zip 02903
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON					
Contact Name Owen Johnson		Contact Title			
Street Address PO Box 5938		City Providence		State RI	Zip 02903
7. LIST ALL MANAGERS (NAMES AND ADDRESSES) OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE. DO NOT LIST MEMBERS. (CHECK BOX FOR ATTACHMENT) ☐					
Manager Name Betaspring Managers 100, LLC		Manager Name			
Street Address 95 Chestnut Street, FL 3		Street Address			
City Providence	State RI	Zip 02903	City	State	Zip
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 Form 642.					

FILED ✓

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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

Owen Johnson

Print or Type Name of Authorized Person

Form No. 632
Revised: 01/2012