

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. 147815		2. Exact name of the limited liability company ALLIED AVIATION, LLC					
177013							
3. State of Formation		4. Brief description of the character of business conducted in Rhode Island purchase, sale, or lease aircraft, equipment and other aero supplies, inventory to charter passengers and freight					
Rhode Island							
5. Principal office address 471 Kilvert Street			City Warwick	State RI	Zip 02886		
· ·	3						
Contact Name John D. Biafore			Contact Title Attorney				
Street Address 123 Dyer Street, Suite 3B			City Providence	State RI	Zip 02903		
			and the second s				
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
		e Office of the Secret	ary of State. Changes require f	lling Form 642.			

FILED

MAR 30 2015

File Date		Under penalty of perjury, I declare and af this report, including any accompanying and that all statements contained herein	schedules and statements,		
Check No		Edmund) fuller D	3/23/15		
By:		Signature of Authorized Person	Date		
DOD OSCIDETA DI	OF STATE USE ONL	Edmund D. Fuller, III, Member	Edmund D. Fuller, Ill, Member		
FOR BEUNEIAN	OF SIATE OSE ONL	Print or Type Name of Authorized Person			

Form No. 632 Revised: 01/2012