



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: 2015

1. ID No. 000841130

2. Exact Name of the Limited Liability Company Southern Graphic Systems, LLC

3. State of Formation

State: KY

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

Prepress Graphic Services

5. Principal Office Address

No. and Street: CSC-LAWYERS INCORPORATING SERVICE
COMPANY
421 W. MAIN

City or Town: FRANKFORT

State: KY Zip: 40601 Country: USA

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

Contact Name: Contact Title:

No. and Street: 626 WEST MAIN STREET, SUITE 500

City or Town: LOUISVILLE

State: KY Zip: 40202 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	DAVID J. MANSELL	161 BAY STREET TORONTO, ON M5J 2S1 CAN
MANAGER	AKIRA OKUBO	161 BAY STREET TORONTO, ON M5J 2S1 CAN
MANAGER	JOSEPH DOOLEY	190 LITTLE FOX LANE SOUTHBURY, CT 06488 USA
MANAGER	DANIEL I MALINA	18442 NICKLAUS WAY

MANAGER	AIDAN TRACEY	EDEN PRAIRIE, MN 55347 USA 626 WEST MAIN ST, STE 500 LOUISVILLE, KY 40202 USA
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**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI
02888

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

Signed this 18 Day of September, 2015 at 2:10:02 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 BELINDA REIS
Signature of Authorized Person

Form No. 632
Revised 09/07

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