

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 2015

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. 146817	2. Exact name of the limited liability company PLUM SAILING, LLC					
3. State of Formation RHODE ISLAND	Brief description of the character of business conducted in Rhode Island BOATING					
5. Principal office address 8 FREEBODY STREET			City NEWPORT	State RI	Zip 02840	
6. MAILING ADDRESS OF LIM	ITED LIABILITY	COMPANY AND N	AME OR TITLE OF CONTACT F	PERSON:		
Contact Name JAMES F. HYMAN			Contact Title REGISTERED AGI	ENT		
Street Address 8 FREEBODY STREET			City NEWPORT	State RI	Zip 02840	
7. LIST <u>ALL</u> MANAGERS (NA ("X" BOX FOR ATTACHMEN		ESSES) OF THE LI	MITED LIABILITY COMPANY, I	F APPLICABLE - <u>DO</u>	NOT LIST MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
8. RESIDENT AGENT IN RHOL	TE ISLAND					
		Office of the Secret	tary of State. Changes require	filing Form 642		
			EDC		OCT 14 PH	
		OCT 14			STATE F: 31	
	8	y an 2	58429			
File Date					firm that I have examined schedules and statements	

and that all statements contained herein are true and correct.

Signature of Authorized Person Conard

Print or Type Name of Authorized Person

9/21/15

Form No. 632 Revised: 01/2012

File Date _

Check No ___

FOR SECRETARY OF STATE USE ONLY