State of Rhode Island and Providence Plantations Fee: \$5 Office of the Secretary of State			
Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040			
NOPE .			
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. <u>000556980</u>			
2. Exact Name of the Limited Liability Company Harrington Associates, LLC			
3. State of Formation			
State: <u>RI</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
······································			
Newsletter publishing and consulting.			
5. Principal Office Addres	55		
	FIFTH AVENUE	I 7: 02912	
City or Town: <u>CH</u>	ARLESTOWN State: <u>R</u>	<u>I</u> Zip: <u>02813</u>	Country: <u>USA</u>
6. Mailing Address of Lin	nited Liability Company and Name	or Title of Contact	Person:
Contact Name: JOHN HARRINGTON Contact Title:			
	<u>IFTH AVENUE</u> A <u>RLESTOWN</u> State: <u>R</u>	Zip: <u>02813</u>	Country: <u>USA</u>
		Zip. <u>02013</u>	<u>004</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Ad	ddress
	First, Middle, Last, Suffix	Address, City or Town	n, State, Zip Code, Country
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11			
ROBERT D. MACLEAN 32 FIFTH AVENUE CHARLESTOWN, RI 02813			
9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).			
9. This report must be ex	tecuted by an authorized person p	ursuant to R.I.G.L.	(כ) מס-סו- (D).

**Signed this 26 Day of October, 2015 at 2:04:56 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 JOHN HARRINGTON Signature of Authorized Person

Form No. 632 Revised 09/07

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