S	tate of Rhode Island and Pro	vidence Plantations	Fee: \$50.00
	Office of the Secreta	ry of State	
HOPE	Division Of Business 148 W. River St Providence RI 0290 (401) 222-304	reet 4-2615	
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>000979892</u>			
2. Exact Name of the Limited Liability Company MERIDIAN OCEAN GROUP, LLC			
3. State of Formation			
State: <u>DE</u>			
4. Brief Description of th	e Character of the Business Which	is Actually Conducted in Rhode	Island
Meridian is a subsea inspection and survey company that focuses on ROV deployments in the			
offshore energy, renewable energy, engineering infrastructure, and infrastructure security			
markets.			
5. Principal Office Address			
No. and Street: 405 N. KING STREET, SUITE 500			
City or Town:WILMINGTONState: DEZip: 19801Country: USA			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
6. Maning Address of Limited Liability Company and Name of The of Contact Person.			
Contact Name: Contact Title: No. and Street: 1 MARITIME DRIVE			
City or Town: <u>PORTSMOUTH</u> State: <u>RI</u> Zip: <u>02871</u> Country: <u>USA</u>			
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code,	Country
MANAGER	NATHANIEL L. SPENCER	121 SOUTH FAIRFAX STREE ALEXANDRIA, VA 22314 USA	T #2
MANAGER	JAMES BLAKE NOLAN	1 MARITIME DRIVE PORTSMOUTH, RI 02871 USA	
MANAGER	PATRICK J DONOVAN	1 MARITIME DRIVE PORTSMOUTH, RI 02871 USA	

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

PATRICK J. DONOVAN 87 COL CHRISTOPHER GREEN PORTSMOUTH, RI 02871

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

Signed this 20 Day of April, 2016 at 9:02:02 AM 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 JAMES BLAKE NOLAN

Signature of Authorized Person

Form No. 632 Revised 09/07

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