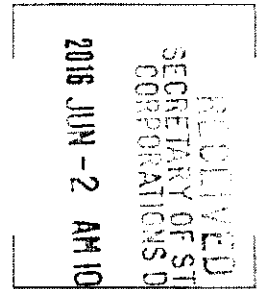




State of Rhode Island and Providence Plantations
Department of State - Business Services Division

148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 | Email: corporations@sos.ri.gov | Website: www.sos.ri.gov

AMENDED



Limited Liability Company Annual Report for the year: 2015

Filing period: September 1 - November 1

Filing Fee: ~~\$50.00~~ *FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID Number		2. Exact name of the Limited Liability Company			
112291		SAT, LLC			
3. State of Formation		4. Brief description of the character of business conducted in Rhode Island			
RHODE ISLAND		TO ACQUIRE AND INVEST IN REAL PROPERTY			
5. Principal Office Address		City	State	Zip	
29 BAYBERRY ROAD		NARRAGANSETT	RI	02882	
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name STEVEN G. TUDINO			Contact Title		
Street Address 29 BAYBERRY ROAD		City NARRAGANSETT	State RI	Zip 02882	
7. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name STEVEN G. TUDINO			Manager Name ALICE M. TUDINO		
Street Address 29 BAYBERRY ROAD			Street Address 29 BAYBERRY ROAD		
City NARRAGANSETT	State RI	Zip 02882	City NARRAGANSETT	State RI	Zip 02882
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Check the box to indicate an attachment ☐					
8. Resident Agent in Rhode Island This information is currently of record in the Department of State. Changes require filing Form 642.					
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Person Steven G. Tudino				Date 5/25/16	
Signature of Authorized Person <i>Steven G. Tudino</i>					

10:58

FILED

JUN 02 2016

BY *[Signature]*



State of Rhode Island and Providence Plantations
Department of State | Office of the Secretary of State
Nellie M. Gorbea, *Secretary of State*

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island
and Providence Plantations, hereby certify that this document, duly executed in
accordance with the provisions of Title 7 of the General Laws of Rhode Island, as
amended, has been filed in this office on this day:

Nellie M. Gorbea
Secretary of State

