

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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2016 SEP - 1 AM 10: 42

Annual Report for the year: Limited Liability Company

- → Filing period: September 1 November 1
- → Filing Fee: \$50.00"
- → Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 000798978	į	Exact name of the Limited Liability Company Double D Distribution, LLC					
3. NAICS Code 42 - Wholesale Trade		Brief description of the character of business conducted in Rhode Island Security System distribution.					
5. State of Formation RI							
6. Principal Office Address 1613 Warwick Avenue			City Warwick	State RI	Zip 02889		
7. Mailing Address of Limited	d Liability Compa	any and Name o	r Title of Contact Person				
Contact Name David W. DeCamp			Contact Title President	Contact Title President			
Street Address 1613 Warwick Avenue			City Warwick	State RI	^{Zip} 02889		
8. List ALL managers (name	es and addresse	s) of the Limited	Liability Company, IF APPLICA	ABLE - DO NOT LIST I	MEMBERS		
Manager Name N/A			Manager Name N/A	Manager Name N/A			
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip ·		
Manager Name N/A			Manager Name N/A	Manager Name N/A			
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip		
Check the box to indicate an attachment							
9. Resident Agent in Rhode	Island. This inforr	mation is currently	of record with the Department of S	tate. Changes require filin	ng Form 642.		
Under penalty of perjury, I statements, and that all sta			examined this report, includi true and correct.	ng any accompanyin	g schedules and		
Name of Authorized Person					Date		
David W. DeCamp				08/29/2	08/29/2016		
Signature of Authorized Pers	W. De C	ansign	DOCUMENT HERE				
		IJ.					

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov **FILED**

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FORM 632 - Revised: 08/2016