State of Rhode Island and Providence Plantations Fee: \$50.0 Office of the Secretary of State			
Division Of Business Services			
148 W. River Street			
Providence RI 02904-2615			
HOPE	(401) 222-304	40	
Limited Liability Com	pany		
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.			
	penalty lee of \$23.00.		
ANNUAL REPORT YEAR: 2016			
1. ID No. <u>000141957</u>			
2. Exact Name of the Limited Liability Company VisionPoint, LLC			
3. State of Formation			
State: CT			
ARTICLE III			
Using the following NAICS codes, please select the code that best describes your business.			
NAICS Code			
		<u>6</u> <u>81</u>	
4. Brief Description of th	e Character of the Business Which	is Actually Conducted in Rhode) Island
AUDIO & VISUAL PERSENTATION EQUIPMENT-DESIGN SERVICE, INSTALL			
5. Principal Office Addre	SS		
No. and Street: <u>152 ROCKWELL ROAD, B6</u> City or Towney <u>NEWINCTON</u> States CT 7 (6111 Countery USA			
City or Town:NEWINGTONState: CTZip:06111Country:USA			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title:			
No. and Street: <u>152 ROCKWELL ROAD</u>			
	INGTON State	: <u>CT</u> Zip: <u>06111</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	KEVIN J. LAVOIE	93 LINDEN DRIVE	
		KENSINGTON, CT 06037 USA	4
MANAGER	ZOFIA LAVOIE	93 LINDEN DRIVE	

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

NATIONAL REGISTERED AGENTS, INC. 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST PROVIDENCE, RI 02914

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

Signed this 12 Day of September, 2016 at 3:16:00 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 <u>ZOFIA LAVOIE</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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