	State of Rhode Island and Providence Plantations Fee Office of the Secretary of State	e: \$50.(
	Division Of Business Services	
	148 W. River Street	
	Providence RI 02904-2615	
HOPE	(401) 222-3040	
imited Liability Co	ompany	
Annual Report		
Filing Period: Septembe	er 1 - November 1	
	G.L. 7-16-66(d), each limited liability company failing or refusing	
	vithin thirty (30) days after the time prescribed by law (R.I.G.L. 7- o a penalty fee of \$25.00.	
ANNUAL REPORT YEA	<b>AR</b> : <u>2016</u>	
1. ID No. <u>000486</u>	305	
2. Exact Name of the	Example Liability Company Mettler-Toledo Rainin, LLC	
3. State of Formation	ı	
_		
State: <u>DE</u>		
State: <u>DE</u>		
State: <u>DE</u>	ARTICLE III	
Using the following NA	ARTICLE III ICS codes, please select the code that best describes your business.	
Using the following NA	ICS codes, please select the code that best describes your business.	and
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Using the following NAI NAICS Code 4. Brief Description of <u>PIPETTE MANUFAC</u> 5. Principal Office Add No. and Street: <u>7500</u>	ICS codes, please select the code that best describes your business.    6 81   f the Character of the Business Which is Actually Conducted in Rhode Isla   CTURER   dress   0 EDGEWATER DRIVE	
Using the following NAI NAICS Code 4. Brief Description of <u>PIPETTE MANUFAC</u> 5. Principal Office Add No. and Street: <u>7500</u>	ICS codes, please select the code that best describes your business.	
Using the following NAI NAICS Code 4. Brief Description of PIPETTE MANUFAC 5. Principal Office Add No. and Street: 7500 City or Town: 0A1	ICS codes, please select the code that best describes your business.    6 81   f the Character of the Business Which is Actually Conducted in Rhode Isla   CTURER   dress   0 EDGEWATER DRIVE	
Using the following NAI NAICS Code 4. Brief Description of <u>PIPETTE MANUFAC</u> 5. Principal Office Add No. and Street: <u>7500</u> City or Town: <u>OA</u> 6. Mailing Address of	ICS codes, please select the code that best describes your business.    6 81   f the Character of the Business Which is Actually Conducted in Rhode Island   CTURER   dress   0 EDGEWATER DRIVE   KLAND State: CA Zip: 94621-0060 Country: U	
Using the following NAI NAICS Code 4. Brief Description of PIPETTE MANUFA( 5. Principal Office Add No. and Street: 7500 City or Town: 0AI 6. Mailing Address of Contact Name: Conta	ICS codes, please select the code that best describes your business.           81           f the Character of the Business Which is Actually Conducted in Rhode Isla   CTURER   dress   0 EDGEWATER DRIVE   KLAND State: CA Zip: 94621-0060 Country: 1   f Limited Liability Company and Name or Title of Contact Person:	
Using the following NAI NAICS Code 4. Brief Description of PIPETTE MANUFAC 5. Principal Office Add No. and Street: 7500 City or Town: 0AI 6. Mailing Address of Contact Name: Conta No. and Street: 7500	ICS codes, please select the code that best describes your business.    6 81   f the Character of the Business Which is Actually Conducted in Rhode Island   CTURER   dress   0 EDGEWATER DRIVE   KLAND State: CA Zip: 94621-0060 Country: I   f Limited Liability Company and Name or Title of Contact Person:   act Title:	JSA
Using the following NAI NAICS Code 4. Brief Description of PIPETTE MANUFAC 5. Principal Office Add No. and Street: 7500 City or Town: 0A1 6. Mailing Address of Contact Name: Conta No. and Street: 7500 City or Town: 0AK	ICS codes, please select the code that best describes your business.    ICS codes, please select the code that best describes your business.   Image: Select the Character of the Business Which is Actually Conducted in Rhode Isla   CTURER   dress   0 EDGEWATER DRIVE   KLAND State: CA   Zip: 94621-0060 Country: I   i Limited Liability Company and Name or Title of Contact Person:   act Title:   DEDGEWATER DRIVE   KLAND State: CA   Zip: 94621-0060 Country: I   s of Each Manager of the Limited Liability Company, if Applicable.	JSA
Using the following NAI NAICS Code 4. Brief Description of PIPETTE MANUFAC 5. Principal Office Add No. and Street: 7500 City or Town: 0AI 6. Mailing Address of Contact Name: Conta No. and Street: 7500 City or Town: 0AK	ICS codes, please select the code that best describes your business.    ICS codes, please select the code that best describes your business.   Image: Select the Character of the Business Which is Actually Conducted in Rhode Isla   CTURER   dress   0 EDGEWATER DRIVE   KLAND State: CA   Zip: 94621-0060 Country: I   i Limited Liability Company and Name or Title of Contact Person:   act Title:   DEDGEWATER DRIVE   KLAND State: CA   Zip: 94621-0060 Country: I   s of Each Manager of the Limited Liability Company, if Applicable.	JSA

## Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

<u>CT CORPORATION SYSTEM</u> <u>450 VETERANS MEMORIAL PARKWAY, SUITE 7A</u> <u>EAST</u> <u>PROVIDENCE</u>, <u>RI</u> <u>02914</u>

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

## Signed this 26 Day of September, 2016 at 10:28:09 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 <u>KELLY LETTMANN</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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