



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**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: 2016

1. ID No. 000313462

2. Exact Name of the Limited Liability Company Armistice Partners, LLC

3. State of Formation

State: RI

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code

6

52

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

INSURANCE & RELATED BUSINESS

5. Principal Office Address

No. and Street: 55 EAST STREET
City or Town: PAWTUCKET State: RI Zip: 02860 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: JOSEPH W MCKENNA Contact Title:
No. and Street: 60 FRANK STREET
City or Town: PAWTUCKET State: RI Zip: 02860 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

| Title | Individual Name First, Middle, Last, Suffix | Address Address, City or Town, State, Zip Code, Country |
|---------|--|--|
| MANAGER | JOSEPH W. MCKENNA | 60 FRANK STREET PAWTUCKET, RI 02860 USA |
| MANAGER | PATRICK J MCKENNA | 111 WEEDEN AVE |

| | | |
|---------|------------------------|--|
| | | RUMFORD, RI 02916 USA |
| MANAGER | EDMOND A BEAUV AIS JR | 49 SEBA KENT ROAD PAWTUCKET, RI 02861 USA |
| MANAGER | PATRICIA SMITH MCKENNA | 111 WEEDEN AVE RUMFORD, RI 02916 USA |

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

ROBERT D. GOLDBERG, ESQ. 228 COTTAGE STREET PAWTUCKET, RI 02860

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

Signed this 27 Day of September, 2016 at 12:22:32 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 PATRICIA SMITH MCKENNA
Signature of Authorized Person

Form No. 632
Revised 09/07

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