(3)	State of Rhode Island and Providence Plantations	_
(G)	State of Rhode Island and Providence Plantations Department of State - Business Services Division	on

Annual Report for the year:							

- → 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 155505	Exact name of the Limited Liability Company Redox Tech NE, LLC					
			haracter of business conducted on services and any other law			
5. State of Formation Rhode Island						
6. Principal Office Address			City	State	Zip	
180 America Way			Jamestown	RI	02835	
7. Mailing Address of Limited Lia	bility Compa	ny and Name or	Title of Contact Person			
Contact Name Dan Regan			Contact Title Member	Contact Title Member		
Street Address 180 America Way			City Jamestown	State RI	^{Zip} 02835	
8. List ALL managers (names ar	nd addresses) of the Limited	Liability Company, IF APPLICAL	BLE - DO NOT LIST I	MEMBERS	
Manager Name			Manager Name			
Street Address		· · · · · · · · · · · · · · · · · · ·	Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name	<u> </u>		Manager Name			
Street Address	<u> </u>		Street Address			
City	State	Zip	City	State	Zip	
				Check the box to i	ndicate an attachment	
9. Resident Agent in Rhode Islan	nd. This inform	nation is currently	of record with the Department of Sta	ate. Changes require filir	ng Form 642.	
Under penalty of perjury, I dec statements, and that all staten	lare and affi	irm that I have	examined this report, including			
Name of Authorized Person	Date 0	30/20/6				
Daniel Regan				71.	501 0016	
Signature of Authorized Person	0	人 XiGN	POCUMENT HERE			

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615 **Phone:** (401) 222-3040

Website: www.sos.ri.gov

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