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	State of Rhode Island and Providence Plant Office of the Secretary of State	ations Fee: \$50.
	Division Of Business Services	
	148 W. River Street	
	Providence RI 02904-2615	
HOPE	(401) 222-3040	
imited Liability C	Company	
Annual Report		
Filing Period: Septembe	er i - November i	
	G.L. 7-16-66(d), each limited liability company failing or refu	
	within thirty (30) days after the time prescribed by law (R.I.G to a penalty fee of \$25.00.	J.L. /-
ANNUAL REPORT YE	AR: <u>2016</u>	
1. ID No. <u>001102</u>	2321	
2. Exact Name of the	e Limited Liability Company <u>VELOCITY RISK UND</u>	ERWRITERS, LLC
3. State of Formatio	n	
State: <u>DE</u>		
State: <u>DE</u>	ARTICLE III	
State: <u>DE</u>	ARTICLE III	
	ARTICLE III AICS codes, please select the code that best describes your	r business.
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Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK, RI 02888

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

Signed this 7 Day of October, 2016 at 3:55:09 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>RON CARLSON</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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