|   | State of Rhode Island and Providence Plantations Fe<br>Office of the Secretary of State  | e: \$50   |
|---|--|-----------|
|   | Division Of Business Services  |           |
|   | 148 W. River Street  |           |
|   | Providence RI 02904-2615   |           |
| HOPE  | (401) 222-3040   |           |
|   | ity Company  |           |
| Innual Repor  | r <b>t</b><br>otember 1 - November 1   |           |
|   | h R.I.G.L. 7-16-66(d), each limited liability company failing or refusing  |           |
|   | eport within thirty (30) days after the time prescribed by law (R.I.G.L. 7-  |           |
| 6-66(b&c)) is sub   | bject to a penalty fee of \$25.00.   |           |
| NNUAL REPOR   | RT YEAR: <u>2016</u>   |           |
| I. ID No. <u>00</u>   | 01294813   |           |
| 2. Exact Name   | of the Limited Liability Company Diederich Insurance Agency, LLC   |           |
| 3. State of Forr  | mation   |           |
| State: IL   |  |           |
|   | ARTICLE III  |           |
|   |  |           |
|   |  |           |
| Using the followin  | ng NAICS codes, please select the code that best describes your business.  |           |
| Using the followin  | ng NAICS codes, please select the code that best describes your business.  |           |
| NAICS Code  | <u>6</u> <u>81</u>   | and       |
| NAICS Code  |  | and       |
| NAICS Code  | tion of the Character of the Business Which is Actually Conducted in Rhode Isl   | and       |
| NAICS Code  | tion of the Character of the Business Which is Actually Conducted in Rhode Isl   | and       |
| NAICS Code  | tion of the Character of the Business Which is Actually Conducted in Rhode Isl   | and       |
| NAICS Code<br>4. Brief Descript<br>SELLING OF I<br>5. Principal Offic   | tion of the Character of the Business Which is Actually Conducted in Rhode Isl   | and       |
| NAICS Code<br>4. Brief Descript<br>SELLING OF I<br>5. Principal Offic<br>No. and Street:  | tion of the Character of the Business Which is Actually Conducted in Rhode Isl INSURANCE ce Address  |           |
| NAICS Code<br>4. Brief Descript<br>SELLING OF I<br>5. Principal Offic<br>No. and Street:<br>City or Town:   | tion of the Character of the Business Which is Actually Conducted in Rhode Isl INSURANCE Ce Address 506 WEST MAIN STREET   |           |
| NAICS Code<br>4. Brief Descript<br>SELLING OF I<br>5. Principal Offic<br>No. and Street:<br>City or Town:<br>6. Mailing Addre   | Image: Section of the Character of the Business Which is Actually Conducted in Rhode Island         Insurance         ce Address         506 WEST MAIN STREET         CARBONDALE         State: IL       Zip: 62901         Country: Uses of Limited Liability Company and Name or Title of Contact Person:  |           |
| NAICS Code<br>4. Brief Descript<br>SELLING OF I<br>5. Principal Offic<br>No. and Street:<br>City or Town:<br>6. Mailing Addre<br>Contact Name:  | 6       81         tion of the Character of the Business Which is Actually Conducted in Rhode Isl         INSURANCE         ce Address         506 WEST MAIN STREET         CARBONDALE         State: IL       Zip: 62901         Country: Uses of Limited Liability Company and Name or Title of Contact Person:         TRACI WRIGHT Contact Title:       EXECUTIVE ASSISTANT  |           |
| NAICS Code<br>4. Brief Descript<br>SELLING OF I<br>5. Principal Offic<br>No. and Street:<br>City or Town:<br>6. Mailing Addre<br>Contact Name:<br>No. and Street:                                       | Image: Section of the Character of the Business Which is Actually Conducted in Rhode Island         Insurance         ce Address         506 WEST MAIN STREET         CARBONDALE         State: IL       Zip: 62901         Country: Uses of Limited Liability Company and Name or Title of Contact Person:  | <u>SA</u> |
| NAICS Code<br>4. Brief Descript<br>SELLING OF I<br>5. Principal Offic<br>No. and Street:<br>City or Town:<br>6. Mailing Addre<br>Contact Name:<br>No. and Street:<br>City or Town:                      | Image: Solution of the Character of the Business Which is Actually Conducted in Rhode Island         Imsurance         Imsurance | <u>SA</u> |
| NAICS Code<br>4. Brief Descript<br>SELLING OF I<br>5. Principal Offic<br>No. and Street:<br>City or Town:<br>6. Mailing Addre<br>Contact Name:<br>No. and Street:<br>City or Town:<br>7. Name and Addre | Image: Solution of the Character of the Business Which is Actually Conducted in Rhode Island         Imsurance         Imsurance | <u>SA</u> |

## 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> 02914

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

**Signed this 11 Day of October, 2016 at 4:18:36 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 TRACI WRIGHT

Signature of Authorized Person

Form No. 632 Revised 09/07

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