State of Rhode Island and Providence Plantations Department of State - Business Services Division				
Annual Report for the year:	2016			

Limited Liability Company → Filing period: September 1 - November 1 → Filing Fee: \$50.00

- → Penalty: Additional \$25.00 fee if form is not filed by December 1.

							
Entity ID Number	Exact name of the Limited Liability Company						
810067	Ripples LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
61	Swimming instruction						
5. State of Formation	1						
Rhode Island							
C. Dalmainal Office Address			City	State	Zip		
Principal Office Address 101 Greystone Terrace			Portsmouth		02871		
101 Greystone Terrace			Portsmouth	RI	028/1		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Beth Heelan			Contact Title Owner				
Street Address 101 Greystone Terrace			City Portsmouth	State RI	Zip 02871		
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name None			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zíp		
Check the box to indicate an attachment							
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.							
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.							
Name of Authorized Person					1. 1.		
Beth Heelan				10/	76/16		
Signature of Aythorized Reison SIGN DOCUMENT 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 FILED OCT 2 4 2016