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.

1. Entity ID Number	2. Exact name	of the Limited Lia	bility Company			
816711	Daniel Penn Associates, LLC					
3. NAICS Code	4. Brief descrip	otion of the charac	cter of business conducte	d in Rhode Island		
54 - Professional, Scientific, a	Management Consulting and Training					
5. State of Formation]					
СТ						
6. Principal Office Address City				State	Zip	
151 New Park Avenue, Suite 106			Hartford	ст	06106	
7. Mailing Address of Limited Lia		and Name or Title				
Contact Name Antonio R. Rodriguez		Contact Title President				
Street Address 151 New Park Avenue, Suite 106			City Hartford	State CT	^{Zip} 06106	
8. List ALL managers (names an	id addresses) of	the Limited Liabil	ity Company, IF APPLICA	ABLE - do not list m	MEMBERS	
Manager Name Antonio R. Rodnavoz			Manager Name			
Street Address 51 New Park Low St. 106			Street Address			
city Hartford	State	Zip 06 106	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
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 decl statements, and that all statem				ng any accompanying	schedules and	
Name of Authorized Person				Date	Date	
Antonio R. Rodriguez			10/31/20	10/31/2016		
Signature of Authorized Person	1 .	OFFICIAL CAPACI	NA IN ACT A STEEL OF STREET			
Signature of Authorized Person (intriv R - Rodu FIGN 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

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