	State of Rhode Island and Providence Plantations Office of the Secretary of State	Fee: \$50.0
	Division Of Business Services	
	148 W. River Street	
	Providence RI 02904-2615 (401) 222-3040	
HOPE	(401) 222-3040	
_imited Liabili		
Annual Report	r t 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-	
	bject to a penalty fee of \$25.00.	
ANNUAL REPOR	RT YEAR: 2016	
1. ID No. <u>00</u>	00114402	
2. Exact Name	of the Limited Liability Company The Bottom Line, LLC	
3. State of Form	nation	
State: <u>RI</u>		
	ARTICLE III	
Using the followin	ng NAICS codes, please select the code that best describes your busines	SS.
Using the followin	ng NAICS codes, please select the code that best describes your busines	ss. 11
NAICS Code	6	<u>11</u>
NAICS Code		<u>11</u>
NAICS Code	6	<u>11</u>
NAICS Code 4. Brief Descript	6	<u>11</u>
NAICS Code 4. Brief Descript	tion of the Character of the Business Which is Actually Conducted in AT-SPORTFISHING	<u>11</u>
NAICS Code 4. Brief Descript CHARTER BOA 5. Principal Offic	tion of the Character of the Business Which is Actually Conducted in AT-SPORTFISHING ce Address	<u>11</u>
AICS Code 4. Brief Descript <u>CHARTER BOA</u> 5. Principal Offic No. and Street:	tion of the Character of the Business Which is Actually Conducted in AT-SPORTFISHING ce Address <u>21 PERRY AVENUE</u>	<u>11</u> in Rhode Island
NAICS Code 4. Brief Descript <u>CHARTER BOA</u> 5. Principal Offic No. and Street: City or Town:	tion of the Character of the Business Which is Actually Conducted in <u>AT-SPORTFISHING</u> ce Address <u>21 PERRY AVENUE</u> <u>WAKEFIELD</u> State: <u>RI</u> Zip: <u>02879</u> C	<u>11</u> in Rhode Island
NAICS Code 4. Brief Descript <u>CHARTER BOA</u> 5. Principal Offic No. and Street: City or Town:	tion of the Character of the Business Which is Actually Conducted in AT-SPORTFISHING ce Address <u>21 PERRY AVENUE</u>	<u>11</u> in Rhode Island
AICS Code 4. Brief Descript <u>CHARTER BOA</u> 5. Principal Offic No. and Street: City or Town: 6. Mailing Addre	6 tion of the Character of the Business Which is Actually Conducted in AT-SPORTFISHING C Address <u>21 PERRY AVENUE</u> WAKEFIELD State: RI Zip: 02879 C ess of Limited Liability Company and Name or Title of Contact Pers FRED S BOWMAN Contact Title:	<u>11</u> in Rhode Island
NAICS Code 4. Brief Descript CHARTER BOA 5. Principal Offic No. and Street: City or Town: 6. Mailing Addreet: Contact Name: No. and Street:	tion of the Character of the Business Which is Actually Conducted in <u>AT-SPORTFISHING</u> <u>ce Address</u> <u>21 PERRY AVENUE</u> <u>WAKEFIELD</u> State: <u>RI</u> Zip: <u>02879</u> C ess of Limited Liability Company and Name or Title of Contact Pers <u>FRED S BOWMAN</u> Contact Title: <u>21 PERRY AVENUE</u>	<u>11</u> in Rhode Island
AICS Code 4. Brief Descript <u>CHARTER BOA</u> 5. Principal Offic No. and Street: City or Town: 6. Mailing Addree Contact Name:	tion of the Character of the Business Which is Actually Conducted in <u>AT-SPORTFISHING</u> <u>ce Address</u> <u>21 PERRY AVENUE</u> <u>WAKEFIELD</u> State: <u>RI</u> Zip: <u>02879</u> C ess of Limited Liability Company and Name or Title of Contact Pers <u>FRED S BOWMAN</u> Contact Title: <u>21 PERRY AVENUE</u>	<u>11</u> in Rhode Island
AICS Code 4. Brief Descript CHARTER BOA 5. Principal Offic No. and Street: City or Town: 6. Mailing Addreet: Contact Name: No. and Street: City or Town:	Identify the second se	<u>11</u> in Rhode Island country: <u>USA</u> son:
AICS Code 4. Brief Descript <u>CHARTER BOA</u> 5. Principal Offic No. and Street: City or Town: 6. Mailing Addreet: Contact Name: No. and Street: City or Town: 7. Name and Ad	Identify the second se	<u>11</u> in Rhode Island Country: <u>USA</u> son: ountry: <u>USA</u> able.

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

FRED S. BOWMAN <u>21 PERRY AVENUE</u> <u>WAKEFIELD</u>, <u>RI</u> <u>02879</u>

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

Signed this 15 Day of November, 2016 at 4:52:09 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>FRED S BOWMAN</u> Signature of Authorized Person

Form No. 632 Revised 09/07

 $\textcircled{\mbox{\sc only}}$ 2007 - 2016 State of Rhode Island and Providence Plantations All Rights Reserved