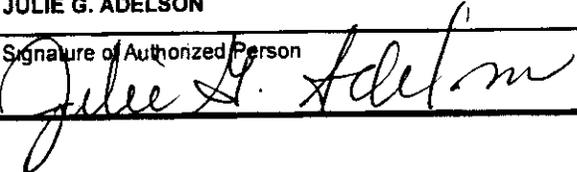


State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2016
Limited Liability Company

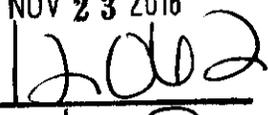
- Filing period: September 1 - November 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number 132599		2. Exact name of the Limited Liability Company Sorcerer, LLC			
3. NAICS Code 81 Other Services (except Pub		4. Brief description of the character of business conducted in Rhode Island Purchase and operation of sailing vessels of all kinds			
5. State of Formation RHODE ISLAND					
6. Principal Office Address 38 Bellevue Avenue, Suite H		City Newport	State RI	Zip 02840	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Julie G. Adelson, c/o J. Craig Venter Institute			Contact Title Vice President and General Counsel		
Street Address 4120 Capricorn Lane		City La Jolla	State CA	Zip 92037	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name		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	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.					
<i>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.</i>					
Name of Authorized Person JULIE G. ADELSON				Date 10/04/2016	
Signature of Authorized Person 					

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.n.gov

FILED

NOV 23 2016

By 
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