



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

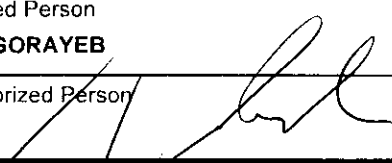
Annual Report for the year: 2016

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 268231		2. Exact name of the Limited Liability Company Se Cayo, 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 AND POWER 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 CHRISTOPHER GORAYEB			Contact Title MEMBER		
Street Address 100 WILLIAM STREET, SUITE 1205			City NEW YORK		State NY Zip 10038
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 ☐					
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 CHRISTOPHER GORAYEB				Date 10/11/16	
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.ri.gov

FILED

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