S	itate of Rhode Island and Pro Office of the Secret	
	Division Of Busines	s Services
	148 W. River S	
	Providence RI 029	
HOPE	(401) 222-30	40
Limited Liability Com	ipany	
Annual Report	Marriera	
Filing Period: September 1	- November 1	
	7-16-66(d), each limited liability com	
16-66(b&c)) is subject to a	in thirty (30) days after the time prese penalty fee of \$25.00	cribed by law (R.I.G.L. 7-
ANNUAL REPORT YEAR: 2016		
1. ID No. <u>00015285</u>	1	
2. Exact Name of the Limited Liability Company FI Services Holdings, LLC		
3. State of Formation		
State: DE		
Using the following NAICS	codes, please select the code that I	best describes your business.
NAICS Code		<u>6</u> <u>52</u>
4. Brief Description of th	e Character of the Business Whic	h is Actually Conducted in Rhode Island
HOLDING COMPANY	FOR SPIA(INVESTMENT	
ADVISORS)/SPS(BRO	KER/DEALER)/SPIS(INS)	
5. Principal Office Addre	SS	
	IRD AVENUE, 27TH FLOOR	State: NV Zin: 10022 Country: USA
City or Town: <u>NEW Y</u>		State: <u>NY</u> Zip: <u>10022</u> Country: <u>USA</u>
6. Mailing Address of Li	mited Liability Company and Nam	e or Title of Contact Person:
Contact Name: Contact	Title:	
	IRD AVENUE, 27TH FLOOR	
City or Town: <u>NEW Y</u>	<u>ORK</u>	State: <u>NY</u> Zip: <u>10022</u> Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS		
Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	FOCUS OPERATING, LLC	825 THIRD AVENUE, 27TH FLOOR
		NEW YORK, NY 10022 USA

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

<u>CT CORPORATION SYSTEM</u> <u>450 VETERANS MEMORIAL PARKWAY, SUITE 7A</u> <u>EAST</u> <u>PROVIDENCE</u>, <u>RI</u> 02914

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

Signed this 13 Day of February, 2017 at 5:20:21 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>RUEDIGER ADOLF</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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