



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(401) 222-3040

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2016

1. ID No. 000507315

2. Exact Name of the Limited Liability Company IDT911, LLC

3. State of Formation

State: DE

ARTICLE III

Using the following NAICS codes, please select the code that best describes your business.

NAICS Code

6

561110

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

ANY LAWFUL BUSINESSS

5. Principal Office Address

No. and Street: 7580 N DOBSON ROAD SUITE 201

City or Town: SCOTTSDALE

State: AZ Zip: 85256 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: VICTORIA MCCOY Contact Title: EVP, CHIEF OF STAFF

No. and Street: 77 EDDY STREET

4TH FLOOR

City or Town: PROVIDENCE

State: RI

Zip: 02903

Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.

DO NOT LIST MEMBERS

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
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8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER

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

SEAN DALY 77 EDDY STREET, 4TH FLOOR PROVIDENCE , RI 02903

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

Signed this 18 Day of April, 2017 at 9:37:39 AM 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 VICTORIA MCCOY
Signature of Authorized Person

Form No. 632
Revised 09/07

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