RI SOS Filing Number: 201741349830 Date: 10/31/2016 4:00:00 PM

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	2. Exact name of the Limited Liability Company				
126249	LAUGHING DOLPHIN, LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
71					
5. State of Formation	BOATING				
RHODE ISLAND					
6. Principal Office Address			City	State	Zip
8 FREEBODY STREET			NEWPORT	Ri	02840
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name JAMES F. HYMAN			Contact Title REGISTERED AGENT		
Street Address 8 FREEBODY STREET			City NEWPORT	State RI	Zip 02840
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 attachme					
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 Tohn Podercy essky Member				Date 10.20.14	
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					
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