s	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
HOPE	Division Of Business 148 W. River St Providence RI 0290 (401) 222-304	reet 14-2615	
Limited Liability Com Annual Report	pany		
Filing Period: September 1	- November 1		
	7-16-66(d), each limited liability comp in thirty (30) days after the time presci penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2017</u>		
1. ID No. <u>00079043</u>	<u>l</u>		
2. Exact Name of the Limited Liability Company <u>STERLING ENVIRONMENTAL</u> <u>TECHNOLOGIES LLC</u>			
3. State of Formation			
State: <u>RI</u>			
	ARTICLE III		
Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of business in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification <u>click here.</u>			
NAICS Code		6 23	
4. Brief Description of th	e Character of the Business Which	is Actually Conducted in Rh	ode Island
OPERATIONS AND M	AINTENANCE OF SEPTIC SYS	TEMS.	
5. Principal Office Addre	SS		
No. and Street: <u>141</u>	ASHER AVENUE		
City or Town:STONINGTONState: CTZip:06379Country:USA			
6. Mailing Address of Lir	nited Liability Company and Name	or Title of Contact Person:	
Contact Name: Contact Title:			
	WEST BEACH ROAD LESTOWN Sta	ate: RI zip: 02813 Cou	Intry: USA
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. Citv or Town. State. Zip	Code, Country

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

ROBERT D. FROST 319A WEST BEACH ROAD CHARLESTOWN, RI 02813

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

Signed this 31 Day of August, 2017 at 3:29:55 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>WHITNEY R FROST</u> Signature of Authorized Person

Form No. 632 Revised 09/07

 $\textcircled{\mbox{\sc b}}$ 2007 - 2017 State of Rhode Island and Providence Plantations All Rights Reserved