S	itate of Rhode Island and Pro Office of the Secreta	
	Division Of Business	Services
	148 W. River S	
	Providence RI 0290	
HOPE	(401) 222-30	40
Limited Liability Com	ipany	
Annual Report	Maximutand	
Filing Period: September 1	- November 1	
	7-16-66(d), each limited liability com in thirty (30) days after the time presc	
16-66(b&c)) is subject to a		Tibed by law (N.I.G.L. 7-
ANNUAL REPORT YEAR:	2017	
1. ID No. <u>000998119</u>	<u>9</u>	
2. Exact Name of the Li	mited Liability Company <u>RIDING</u>	LIGHT LLC
3. State of Formation		
State: <u>RI</u>		
	ARTICLE III	
the list of codes <u>here.</u> Mor <u>531390</u>	e information on <u>NAICS</u> can be found	online.
4. Brief Description of th	e Character of the Business Which	is Actually Conducted in Rhode Island
TO ENGAGE THE BUSINESS OF BUYING, SELLING, OWNING, DEVELOPING AND		
MANAGING REAL PR	OPERTY, AND ALL ACTIVITIE	S INCIDENTAL THERETO.
5. Principal Office Addre	SS	
No. and Street: P	.O. BOX 1100	
	EWPORT State: <u>RI</u>	Zip: <u>02840</u> Country: <u>USA</u>
C Mailing Address of Li	mited Liebility Compony and Name	ar Title of Contract Baraan.
	mited Liability Company and Name	
Contact Name: Contact		
	THAMES ST. #1100 PORT State	e: RI Zip: 02840 Country: USA
	Each Manager of the Limited Liak	
Title	Individual Name	Address
i iue	First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	BIRD B. STASZ	1331 JAMES ROAD
		WEYBRIDGE, VT 05753 USA

MANAGER

WILLIAM H. DYER JONES

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

CHRISTOPHER MCNALLY 130 BELLEVUE AVENUE NEWPORT, RI 02840

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 September, 2017 at 11:57:32 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 BIRD B. STASZ

Signature of Authorized Person

Form No. 632 Revised 09/07

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