

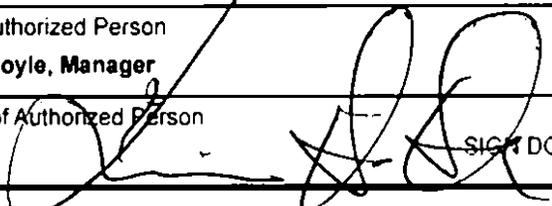


State of Rhode Island and Providence Plantations
Department of State - Business Services Division

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Annual Report for the year: 2015
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 115182		2. Exact name of the Limited Liability Company Shannon Systems, LLC			
3. NAICS Code 541519 81 - Other Services (except P)		4. Brief description of the character of business conducted in Rhode Island Provide electronic data interchange services			
5. State of Formation MA					
6. Principal Office Address 173 Spark Street		City Brockton	State MA	Zip 02302	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Kevin H. Hoyle		Contact Title Manager			
Street Address P. O. Box 838		City Hope Valley	State RI	Zip 02832	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Kevin H. Hoyle		Manager Name			
Street Address P. O. Box 838		Street Address			
City Hope Valley	State RI	Zip 02832	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
Check the box to indicate an attachment <input type="checkbox"/>					
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 Kevin H. Hoyle, Manager				Date 16 May 2017	
Signature of Authorized Person 				SIGN DOCUMENT HERE	

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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