RI SOS Filing Number: 201749666740 Date: 9/13/2017 3:34:00 PM



State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

2001

Annual Report for the year:

**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	Exact name of the Limited Liability Company     Shannon Systems, LLC				
3. NAICS Code 54/5/9	Brief description of the character of business conducted in Rhode Island				
81 - Other Services (except Pi	Provide electronic data interchange services				
5. State of Formation					
MA					
6. Principal Office Address			City	State	Zıp
173 Spark Street			Brockton	MA	02302
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Kevin Hoyle			Contact Title Manager		
Street Address P. O. Box 838			City Hope Valley	State RI	<sup>Zip</sup> 02832
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name Kevin Hoyle			Manager Name		
Street Address P. O. Box 838			Street Address		
City Hope Valley	State RI	<sup>Zip</sup> 02832	City	State	Zıp
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zıp
Check the box to indicate an attachment					
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 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 SEP 1 3 2017 3:34

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