Si	ate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
HORE	Division Of Business 148 W. River St Providence RI 0290 (401) 222-304	reet 4-2615	
NOFE STATES			
Limited Liability Com Annual Report Filing Period: September 1 -			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7- 16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2017			
1. ID No. 000788307			
2. Exact Name of the Limited Liability Company <u>FSS LEASING, LLC</u>			
3. State of Formation			
State: <u>NH</u>			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
TO STREAMLINE AND RECORD PAYROLL ACTIVITY FOR PARENT COMPANIES			
5. Principal Office Addres	ŝS		
No. and Street:2 THIBEAULT DRIVECity or Town:BOWState: NHZip: 03304Country: USA			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title: No. and Street: 2 THIBEAULT DRIVE City or Town: BOW State: NH Zip: 03304 Country: USA			
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
MANAGER	First, Middle, Last, Suffix MARK [°] THOMPSOM	Address, City or Town, State, Zi 2 THIBEAULT D	ORIVE
		BOW, NH 03304 U	SA

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

NATIONAL REGISTERED AGENTS, INC. 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST PROVIDENCE, RI 02914

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

Signed this 19 Day of September, 2017 at 4:09:42 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 MARK THOMPSON

Signature of Authorized Person

Form No. 632 Revised 09/07

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