s s	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
Division Of Business Services			
148 W. River Street			
	Providence RI 0290 (401) 222-304		
HOPE			
Limited Liability Com Annual Report	pany		
Filing Period: September 1 - November 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. <u>000122743</u>			
2. Exact Name of the Limited Liability Company FIRST PRIORITY TRAVEL, LLC			
3. State of Formation			
State: <u>NH</u>			
ARTICLE III			
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.			
561520			
<u> </u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
WE SELL TRAVEL PREMIUMS TO BUSINESSES TO GIVE AWAY TO CUSTOMERS OR			
EMPLOYEES AS AN INCENTIVE			
5. Principal Office Addre	SS		
No. and Street: <u>209 DUNLAWTON AVE</u> SUITE 18			
City or Town:PORT ORANGEState: FLZip: 32127Country: USA			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title:			
No. and Street: PO BOX 290125			
City or Town: <u>PORT ORANGE</u> State: <u>FL</u> Zip: <u>32129-0125</u> Country: <u>USA</u>			
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, City or Town, State, Zip Coo	de, Country

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

INCORP SERVICES, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

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 5:25:43 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 NANCY C DELUCA

Signature of Authorized Person

Form No. 632 Revised 09/07

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