



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

Annual Report for the year: 2017
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 1667829		2. Exact name of the Limited Liability Company SV, LLC			
3. NAICS Code 54 - Professional, Scientific		4. Brief description of the character of business conducted in Rhode Island Professional Services			
5. State of Formation Massachusetts		541690			
6. Principal Office Address 222 Third St, Suite 2242			City Cambridge	State MA	Zip 02142
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Bruce Hathaway			Contact Title CFO		
Street Address 223 Third St, suite 2242			City Cambridge	State MA	Zip 02142
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS					
Manager Name			Manager Title		
Street Address			Street Address		
City	State	Zip	City	State	Zip
Manager Name			Manager Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
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 Bruce Hathaway				Date August 30, 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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FORM 632 - Revised: 02/2017