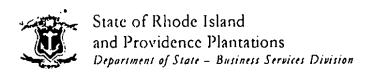
RI SOS Filing Number: 201750553280 Date: 9/27/2017 4:00:00 PM



148 W. River Street Providence, RI 02904-2615 401.222.3040

## LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR \_\_\_\_\_\_ 2017

Filing Period: September 1 - November 1 • Filing Fee: \$50.00\* • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

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.

1. 1D No. 000784756	2. Essact name of the limited liability company KLM Holdings, LLC				531110	
		ers which is actually conducted development, sales		5. State of Formation Rhode Island		
6. Principal office address			City	State	Zip	
4 Frank Avenue			West Kingston	RI	02892	
7. MAILING ADDR	ESS OF LIMITED LIAB	ILITY COMPANY AND	NAME OR TITLE OF CONTACT	PERSON:		
Contact Nume			Contact Title			
Matthew O. Davitt			President			
Street Address			City	State	02892	
4 Frank Avenue			West Kingston	RI	02032	
		CER OF THE LIMITED I S BEFORE USING ATT/		CABLE - DO NOT	LIST MEMBERS	
Manager Name Matthew O. Davitt			Manager Name			
Street Address 4 Frank Avenue			Street Address			
City West Kingston	State RI	7.ip 02892	City	State	Zip	
Manuger Nume			Manuger Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
9. RESIDENT AGEN	T IN RHODE ISLAND			'		
- ,		Tice of the Secretary of Sta	tc. Changes require filing of Form	642 – R.1.G.L. 7-16-1	1 -	
	<u> </u>	<u> </u>	<del> </del>	<u> </u>		

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

FILED	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.
File Date	Mad 9.14.17
Check No.	Sgnature of Authorized Person Date
BY FOR SECRETARY OF STATE USB ONLY	
	Matthew O. Davitt, President