s s	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
HOPE	Division Of Business 148 W. River S Providence RI 029 (401) 222-30	treet 04-2615	
Limited Liebility Com			
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. <u>000927129</u>			
2. Exact Name of the Limited Liability Company STAR INVESTMENTS, LLC			
3. State of Formation			
State: <u>RI</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.			
<u>236118</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
CONSTRUCTION/ RENOVATION AND REAL ESTATE DEVELOPMENT			
5. Principal Office Addre	SS		
No. and Street:135 OICity or Town:PASCO	LD WALLUM LAKE ROAD DAG	State: <u>RI</u> Zip: <u>02859</u> Cou	ıntry: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: <u>KEVIN C. STOCKWELL</u> Contact Title: <u>OWNER</u> No. and Street: 135 OLD WALLUM LAKE ROAD			
No. and Street: <u>135 OL</u> City or Town: <u>PASCO</u>		State: <u>RI</u> Zip: <u>02859</u> Cou	intry: <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 C	ode, Country
MANAGER	KEVIN C. STOCKWELL	135 OLD WALLUM LAI PASCOAG, RI 02859 US	
MANAGER	HEATHER STOCKWELL	135 OLD WALLUM LA	KERD

PASCOAG, RI 02859 USA

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

KEVIN C. STOCKWELL <u>135 OLD WALLUM LAKE ROAD</u> PASCOAG , <u>RI</u> 02859

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

Signed this 9 Day of October, 2017 at 4:43:55 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 <u>KEVIN C. STOCKWELL</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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