S	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
	Division Of Business	Services	
	148 W. River St		
	Providence RI 0290		
HOPE	(401) 222-304	ŧŪ	
Limited Liability Company Annual Report			
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>001661782</u>			
2. Exact Name of the Limited Liability Company Domus Structural Engineering, LLC.			
3. State of Formation			
State: CO			
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.			
<u>541330</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
DESIGN AND REVIEW OF RESIDENTIAL AND COMMERCIAL BUILDING FOR THE			
ADDITION OF SOLAR PV. STRUCTURAL ENGINEERING SERVICES FOR RESIDENTIAL STRUCTURES.			
Solarra v. Sirkoe i orali Lavonallarino Servicels i or Residential Sirkoe i URES.			
5. Principal Office Address			
No. and Street: <u>1210 BIRCH STREET</u>			
	DOMFIELD State: C	2 <u>0</u> Zip: <u>80020</u> Country: <u>I</u>	USA
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: JOHN A. CALVERT Contact Title:			
No. and Street: P,C	D. BOX 6986		
City or Town: <u>BR</u>	OOMFIELD State: CO	Zip: <u>80021</u> Country: <u>U</u>	<u>SA</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 Code,	Country

MANAGER

JOHN A. CALVERT

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 11 Day of October, 2017 at 10:06:31 AM 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 JOHN A. CALVERT

Signature of Authorized Person

Form No. 632 Revised 09/07

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