s s	tate of Rhode Island and Pro Office of the Secret	
	Division Of Busines 148 W. River S Providence RI 029	Street 04-2615
HOPE	(401) 222-30	040
Limited Liability Com Annual Report Filing Period: September 1		
	7-16-66(d), each limited liability com in thirty (30) days after the time prese penalty fee of \$25.00.	
ANNUAL REPORT YEAR:	<u>2017</u>	
1. ID No. <u>000791226</u>	5	
2. Exact Name of the Limited Liability Company <u>BRIDGECONNEX, LLC</u>		
3. State of Formation		
State: MA		
	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>517311</u>		
4. Brief Description of th	e Character of the Business Whic	h is Actually Conducted in Rhode Island
TELECOMMUNICATI	<u>ONS</u>	
5. Principal Office Addre	SS	
	<u>CHESTNUT STREET</u> <u>TH ATTLEBORO</u> Stat	e: <u>MA</u> Zip: <u>02760</u> Country: <u>USA</u>
6. Mailing Address of Lir	nited Liability Company and Nam	e or Title of Contact Person:
	BRECKINRIDGE BLVD	
City or Town: <u>DULU</u>		ate: <u>GA</u> Zip: <u>30096</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 Code, Country
MANAGER	JAMIE KUZMAN	141 CHESTNUT STREET NORTH ATTLEBORO, MA 02760 USA

MANAGER

RICHARD LEBRUN

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 3:09:36 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 KENNY PERKINS

Signature of Authorized Person

Form No. 632 Revised 09/07

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