	ate of Rhode Island and Pro	vidence Plantations	Fee: \$50.00
	Office of the Secreta		Fee: \$50.00
Division Of Business Services			
148 W. River Street			
Providence RI 02904-2615 (401) 222-3040			
HOPE	(401) 222-30	40	
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>001659313</u>			
2. Exact Name of the Limited Liability Company WHIP Systems, LLC			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.			
<u>541511</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
IT CONSULTING & STAFFING			
5. Principal Office Addres	SS		
No. and Street:6205 SCity or Town:AUROR	MAIN STREET, SUITE 270 RA	State: <u>CO</u> Zip: <u>80016</u> Co	untry: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title: No. and Street: <u>6205 S MAIN STREET, SUITE 270</u>			
City or Town: <u>AUROR</u>	<u>A</u>	State: <u>CO</u> Zip: <u>80016</u> Co	untry: <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	Code, Country
MANAGER	MICHAEL GOERNER	25808 E DRY CREE AURORA, CO 80016 US	

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

<u>CORPORATION SERVICE COMPANY</u> <u>222 JEFFERSON BOULEVARD, SUITE 200</u> <u>WARWICK</u>, <u>RI</u> <u>02888</u>

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

Signed this 19 Day of October, 2017 at 10:04:23 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 <u>MICHAEL GOERNER</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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