	State of Rhode Island and Pro Office of the Secreta		<b>DNS</b> Fee: \$50.00
	Division Of Business 148 W. River S	reet	
HOPE	Providence RI 0290 (401) 222-304		
Limited Liability Con Annual Report Filing Period: September 1			
	. 7-16-66(d), each limited liability comp in thirty (30) days after the time presc penalty fee of \$25.00.		<b>*_</b>
ANNUAL REPORT YEAR	: <u>2017</u>		
1. ID No. <u>000950825</u>			
2. Exact Name of the Limited Liability Company <u>GDL MEDIA, LLC</u>			
3. State of Formation			
State: <u>RI</u>			
	ARTICLE III		
-	Code that best describes the primary e information on <u>NAICS</u> can be found	-	v the entity. Download
<u>519130</u>			
4. Brief Description of the	e Character of the Business Which	is Actually Conducte	ed in Rhode Island
TECHNOLGOY, INTE	RNET MEDIA APP DEVELOPM	ENT	
5. Principal Office Addre	255		
	2 UNION STREETRTSMOUTHState: ]	<u>RI</u> Zip: <u>02871</u>	Country: <u>USA</u>
6. Mailing Address of Li	mited Liability Company and Name	or Title of Contact P	Person:
	UNION STREET		
City or Town: POI	RTSMOUTH State: 1	<u>RI</u> Zip: <u>02871</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		Iress
	First, Middle, Last, Suffix	Address, City or Town,	State, Zip Code, Country
8. RESIDENT AGENT IN	RHODE ISLAND - DO NOT ALTER		

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

RAY NEKRASZ 642 UNION STREET PORTSMOUTH , RI 02871

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

**Signed this 24 Day of October, 2017 at 7:27:19 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>RAYMOND NEKRASZ</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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