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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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Annual Report for the year: _____ **Limited Liability Company**

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

1. Entity ID Number	2. Exact name of the Limited Liability Company						
791997	NEIDIN LOCH MARINE, LLC						
3. NAICS Code 812990	4. Brief description of the character of business conducted in Rhode Island						
81 - Other Services (except Pi	PURCHASE AND OPERATION OF SAILING AND POWER VESSELS OF ALL KINDS						
5. State of Formation							
RHODE ISLAND							
6. Principal Office Address			City	State	Zip		
38 BELLEVUE AVENUE, SUITE H			NEWPORT	RI	02840		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name DEVIN B. MCGRANAHAN		Contact Title MEMBER					
Street Address 321 MERRIMAN ROAD			City SEWICKLEY	State PA	^{Zip} 15143		
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS							
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Check the box to indicate an attachment							
9. Resident Agent in Rhode Islan	nd. This informatio	n is currently of reco	ord with the Department of State	e. Changes require filing	Form 642.		
Under penalty of perjury, I dec statements, and that all staten				any accompanying	schedules and		
Name of Authorized Person Date							
DEVIN B. MCGRANAHAN				/0.8	2017		
Signature of Authorized Person							
DAM Gran SIGN DOCUMENT HERE							

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

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FORM 632 - Revised: 82/2817