RI SOS Filing Number: 201752931220 Date: 11/2/2017 4:00:00 PM

State of Rhode Island and Providence Plantations Department of State - Business Services Division

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FOR SECRETARY OF STATE USF ONLY

Annual Report for the year: 2017
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	0 =	# Ab - 1 ! 'A 1 1 !-	L Tr. O				
846731							
NAICS Code 4. Brief description of the character of business conducted in Rhode Island							
54 - Professional, Scientific, a OWNERSHIP AND LICENSIN			IG OF INTELLECTUAL PROPERTIES				
5. State of Formation]						
RHODE ISLAND		541690					
6. Principal Office Address			City	State	Zip		
38 BELLEVUE AVENUE, SUITE	H		NEWPORT	RI	02840		
7. Mailing Address of Limited Lia	 	and Name or Title		•			
Contact Name ANDREW KALLFE	LZ		Contact Title MEMBER				
Street Address 56 GREEN LANE			City JAMESTOWN	State RI	^{Zip} 02835		
8. List ALL managers (names ar	nd addresses) (of the Limited Liabi	lity Company, IF APPLICAB	LE - DO NOT LIST I	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		
			ł	Check the box to it	ndicate an attachment		
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.							
Under penalty of perjury, I dec statements, and that all statem				any accompanyin	g schedules and		
Name of Authorized Person Date							
ANDREW KALLFELZ	/		10/1	0/17			
Signature of Authorized Person SIGN-DOCUMENT HERE							
			71.0.				

MAIL TO:

Division of Business Services

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

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

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