



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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2017 NOV 27 PM 3:29

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 001335322		2. Exact name of the Limited Liability Company LENZING MEDICAL DEVICE DEVLEOPMENT, LLC			
3. NAICS Code 541690		4. Brief description of the character of business conducted in Rhode Island Medical device development services			
5. State of Formation Rhode Island					
6. Principal Office Address 28 Rushton Drive		City Cranston		State RI	Zip 02905
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Ross Lenzing			Contact Title Member, Owner		
Street Address 28 Rushton Drive			City Cranston		State RI Zip 02905
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 <input type="checkbox"/>					
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 declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.					
Name of Authorized Person Ross Lenzing				Date 28 Nov 2017	
Signature of Authorized Person 				SIGN DOCUMENT HERE	

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040

Website: www.sos.ri.gov

FILED

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FORM 632 - Revised: 10/2017