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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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.

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1. Entity ID Number	2. Exact name of the Limited Liability Company							
799587	Shearwater, LLC							
3. NAICS Code	Brief description of the character of business conducted in Rhode Island							
1 811490	Sailin, syndicate							
5. State of Formation	1 34111							
KI								
6. Principal Office Address			City	State	Zip			
# 11 Shore Road			Bristol	RI	02809			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person								
Joseph Whelaw			managens member					
Street Address hove Rd			city Bristol	State	zip02809			
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 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 Date								
Jos-ph W		3/2	2/18					
Signature of Authorized Person								
Journal White FILED								
	MAR 2 2 2018							

MAIL TO:

Division of Business Services

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

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