

State of Rhode Island and Providence Plantations

Department of State - Business Services Division

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	2. Exact name of the Limited Liability Company					
1657247	Waypoint One LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island Marine navigation and communication systems					
488 330						
5. State of Formation	1					
Rhode Island						
6. Principal Office Address			City	State	Zip	
2950 SE OCEAN BLVD # 57-2			STUART	FL	34996	
7. Mailing Address of Limited Li	<u> </u>	and Name or Title	of Contact Person			
Contact Name Richard Morgan Sayers			Contact Title Single Member LLC			
Street Address 2950 SE OCEAN BLVD # 57-2			City STUART	State FL	^{Zip} 34996	
8. List ALL managers (names a	and addresses) of	the Limited Liabi	lity Company, IF APPLIC	ABLE - DO NOT LIST N	IEMBERS	
Manager Name RIUNOVA MOYONN SOVOIS			Manager Name			
Street Address 2950 SE Ocean Bul 572			Street Address			
city Stuart	State	zip 34996	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 Isla	ind. This informatio	n is currently of reco	ord with the Department of S	State. Changes require filing	Form 642.	
Under penalty of perjury, I de statements, and that all state	clare and affirm ments contained	that I have exam I herein are true	ined this report, includ and correct.	ing any accompanying	schedules and	
Name of Authorized Person				Date	Date	
Richard Morgan Sayers				04-01-20	04-01-2018	
Signature of Authorized Person	//	SIGN DO	CUMENT 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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