s s	itate of Rhode Island and Pr Office of the Secret		Fee: \$50.00
HOPE	Division Of Busines 148 W. River Providence RI 029 (401) 222-30	Street 904-2615	
Limited Liability Com Annual Report Filing Period: September 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR:	<u>2018</u>		
1. ID No. <u>001338079</u>			
2. Exact Name of the Limited Liability Company GPS Retirement LLC			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>524210</u>			
4. Brief Description of th	e Character of the Business Whic	h is Actually Conducted in Rhode	Island
FINANCIAL AND INS	URANCE SERVICES		
5. Principal Office Addre	SS		
	CENTERVILLE RD		
	TE 340 EAST RWICK Star	e: <u>RI</u> Zip: <u>02886</u> Country:	<u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
	Title: <u>CENTERVILLE RD</u> 'E 340 EAST		
		e: <u>RI</u> Zip: <u>02886</u> Country:	<u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code,	Country

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

TOM GUIDICI 42 TOMAHAWK CT., WARWICK , RI 02886

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 1 Day of August, 2018 at 10:22:12 AM by the authorized person. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.*

By TOM GUIDICI

Signature of Authorized Person

Form No. 632 Revised 09/07

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