s s	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River S		
HOPE	Providence RI 0290 (401) 222-30		
Limited Liability Company Annual Report Filing Period: September 1 - November 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: 2018			
1. ID No. <u>000503123</u>			
2. Exact Name of the Limited Liability Company <u>BLUE SCREEN SOLUTIONS LLC</u>			
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 here. More information on NAICS can be found online.			
<u>541519</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
<u>AND</u> <u>SUPPORT.</u>	<u>FIONS PROVIDES IN-HOME A</u>	ND REMOTE COMPUTER R	<u>EPAIR</u>
5. Principal Office Addres	SS		
No. and Street: 10 CA	ROLINA MAIN STREET		
City or Town: CARC	DLINA	State: <u>RI</u> Zip: <u>02812</u> Cou	ntry: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact			
No. and Street:10 CACity or Town:CARO	<u>ROLINA MAIN STREET</u> I <u>LINA</u> S	tate: <u>RI</u> Zip: <u>02812</u> Cou	ntry: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip C	ode, Country
			l

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

KENNETH ORABONE 10 CAROLINA MAIN STREET CAROLINA, RI 02812

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 October, 2018 at 6:26:16 PM 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 KENNETH A. ORABONE

Signature of Authorized Person

Form No. 632 Revised 09/07

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