s s	itate of Rhode Island and Pro Office of the Secreta	
HOPE	Division Of Business 148 W. River St Providence RI 0290 (401) 222-304	treet )4-2615
Limited Liability Com Annual Report Filing Period: September 1		
	7-16-66(d), each limited liability comp in thirty (30) days after the time presc penalty fee of \$25.00.	
ANNUAL REPORT YEAR:	<u>2018</u>	
1. ID No. <u>00084981</u>	3	
<b>2. Exact Name of the Limited Liability Company</b> <u>GUARDIAN ENERGY MANAGEMENT</u> <u>SOLUTIONS, LLC</u>		
3. State of Formation		
State: <u>DE</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>238210</u>		
4. Brief Description of th	e Character of the Business Which	is Actually Conducted in Rhode Island
PROVIDING COMPREHENSIVE ENERGY EFFICENCY SOLUTIONS		
5. Principal Office Addre	SS	
	RTHBORO ROAD CENTRAL BOROUGH	State: MA Zip: 01752 Country: USA
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:		
	<sup>Title:</sup> <u>RTHBORO ROAD CENTRAL</u> <u>OROUGH</u>	State: MA Zip: 01752 Country: USA
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

KAS R. DECARVALHO, ESQ. PANNONE LOPES DEVEREAUX & O'GARA LLC 1301 ATWOOD AVENUE, SUITE 215N JOHNSTON, RI 02919

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

**Signed this 23 Day of October, 2018 at 2:39:00 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 <u>LISA COLLETON</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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