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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

STAMP

Annual Report for the year:	2018
Limited Liability Company	

FOR SECRETARY OF STATE

- → 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 001664188	1 .	2 Exact name of the Limited Liability Company Matawai 655, LLC					
3. NAICS Code	4 3 1	Brief description of the character of business conducted in Rhode Island OWNERSHIP AND OPERATION OF BOATS OF ALL KINDS					
5. State of Formation RHODE ISLAND							
6. Principal Office Address 38 BELLEVUE AVENUE, SUITE H			City NEWPORT	State RI	Zip 02840		
7. Mailing Address of Limited	d Liability Compa	any and Name o	r Title of Contact Person	·			
Contact Name MICHAEL J. HAHN			Contact Title MEMBER	Contact Title MEMBER			
Street Address 460 CARPENTERS POINT			City WAYZATA	State MN	ZIP 55391		
8. List ALL managers (name	es and addresse	s) of the Limited	Liability Company, IF APPLICA	BLE - DO NOT LIST N	MEMBERS		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address	Street Address			
City	State	Zıp	City	State	Zıp		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip		
	l			Check the box to it	ndicate an attachment		
9. Resident Agent in Rhode	Island. This inforr	mation is currently	of record with the Department of Sta	ate. Changes require filin	ig Form 642.		
Under penalty of perjury, I statements, and that all sta			examined this report, includire true and correct.	ng any accompanying	g schedules and		
Name of Authorized Person				Date			
MICHAEL J. HAHN					128/18		
Signature of Authorized Pers	son X	SIG	N DOCUMENT HERE	······································			
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MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov **FILED**

OCT 3 1 2018