		Ind and Providence Plantations Fee: \$50.00 the Secretary of State	
		n Of Business Services	
148 W. River Street			
Providence RI 02904-2615			
HOPE		(401) 222-3040	
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			
<b>1. ID No.</b> <u>001013460</u>			
2. Exact Name of the Limited Liability Company ORGANIC DYES AND PIGMENTS, LLC			
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	here. More information on NAICS	can be found online.	
325130			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
MANUFACTURE AND SALES OF DYES AND PIGMENTS			
5. Principal Offi	ce Address		
-			
No. and Street:	65 VALLEY STREET		
City or Town:	EAST PROVIDENCE	State: <u>RI</u> Zip: <u>02914</u> Country: <u>USA</u>	
6. Mailing Addr	ess of Limited Liability Compa	any and Name or Title of Contact Person:	
Contact Name:	Contact Title:		
No. and Street:	65 VALLEY STREET		
City or Town:	EAST PROVIDENCE	State: <u>RI</u> Zip: <u>02914</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	Address	
THUE THE	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country	
MANAGER	RYAN S. KIM	C/O CASTLE ISLAND PARTNERS, LLC, 339 AUBURN ST., STE 12	
		NEWTON, MA 02466 USA	

C/O CASTLE ISLAND PARTNERS, LLC, 339 AUBURN ST., STE 12

MANAGER

MICHAEL G. BARRY

MANAGER
---------

NEWTON, MA 02466 USA

65 VALLEY STREET EAST PROVIDENCE, RI 02914 USA

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

JOSHUA L. CELESTE, ESQ. ONE FINANCIAL PLAZA, SUITE 1800 PROVIDENCE, RI 02903

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

## Signed this 21 Day of November, 2018 at 10:43:32 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 MARK ROLLINS

Signature of Authorized Person

Form No. 632 Revised 09/07

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