S	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River St Providence RI 0290	reet 14-2615	
HOPE	(401) 222-304	40	
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability comp in thirty (30) days after the time presci penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2018</u>		
1. ID No. <u>00167957</u>	<u>)</u>		
2. Exact Name of the Li	mited Liability Company Avery Ha	arper Solutions LLC	
3. State of Formation			
State: <u>MA</u>			
	ARTICLE III		
-	Code that best describes the primary e information on <u>NAICS</u> can be found	-	ntity. Download
4. Brief Description of th	e Character of the Business Which	is Actually Conducted in	Rhode Island
WE DOWIDE BOOKK	EEPING SERVICES TO BUSINI	ESSES IN DUODE ISLAN	
VIRTUALLY ACROSS		25525 IN KHODE ISLAI	
5. Principal Office Addre	SS		
	<u>2 BATES RD</u> NIT 247		
	IASHPEE State: MA	Zip: <u>02649</u> Coun	try: <u>USA</u>
6. Mailing Address of Li	nited Liability Company and Name	or Title of Contact Person	ו:
	DDRIGUEZ Contact Title:		
UNI	<u>BELLEVUE AVE</u> <u>F 374</u>		
City or Town: <u>NEV</u>	VPORT State:	<u>RI</u> Zip: <u>02840</u> Co	untry: <u>USA</u>
7. Name and Address of DO NOT LIST MEMBE	Each Manager of the Limited Liab RS	ility Company, if Applicab	le.
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Z	Lip Code, Country

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

MARC A. LEWIN, ESQ. <u>1 CITIZENS PLAZA, 8TH FLOOR</u> ADLER POLLOCK & SHEEHAN P.C. <u>PROVIDENCE</u>, <u>RI</u> 02903

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

Signed this 30 Day of November, 2018 at 10:11:30 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 PAUL RODRIGUEZ

Signature of Authorized Person

Form No. 632 Revised 09/07

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