RI SOS Filing Number: 201883426130 Date: 12/28/2018 8:37:00 AM

State of Rhode Island and Providence Plantations  Department of State - Business Services Division	2018 0	SE CR
Annual Report for the year: 2014 Limited Liability Company	EC 31	RECEI ETARY PORAT
→ Filing period: September 1 - November 1 → Filing Fee: \$50.00	Ą	SNOI OF S
→ Penalty: Additional \$25.00 fee if form is not filed by December 1.	<del>ထု</del> ယ	DIV

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1. Entity ID Number	1		d Liability Company		<del></del>		
000509401	Curve	Curvewater, LLC					
3. NAICS Code	4. Brief des	Brief description of the character of business conducted in Rhode Island					
541690	Developm	Development of hydrokinetic turbine to generate electricity from ocean tides.					
5. State of Formation							
RI							
6. Principal Office Address	- <del> </del>		City	State	Zip		
124 Blackstone Blvd Apt 6		Providence	RI	02906			
7. Mailing Address of Limite	d Liability Compa	any and Name or					
Contact Name John Duke		Contact Title Sole member	Contact Title Sole member				
Street Address 124 Blackstone Blvd Apt 6		City Providence	State RI	<sup>Zip</sup> 02906			
8. List ALL managers (nam	es and addresse	s) of the Limited	Liability Company, IF APPLICAR	BLE - DO NOT LIST	MEMBERS		
Manager Name		Manager Name	Manager Name				
Street Address			Street Address				
City	State	Zip	Crty	State	Zip		
Manager Name			Manager Name	Manager Name			
Street Address		Street Address					
City	State	Zıp	City	State	Zip		
	l . <u></u>			Check the box to	indicate an attachment		
9. Resident Agent in Rhode	Island. This infor	nation is currently	of record with the Department of Sta	ite. Changes require fili	ng Form 642.		
Under penalty of perjury, statements, and that all si			examined this report, includin true and correct.	g any accompanyin	g schedules and		
Name of Authorized Person			Date	Date			
John Duke				12/ 29/ 2018			
Signature of Authorized Per	rson / ///	_					

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 8:37
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