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Department of State - Business Services Division

Annual Report for the year: ____2018_ **Limited Liability Company**

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

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SECRETARY VEO SE CORPORATIONS DIV
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2019 FEB -5 AM 10: 05

1. Entity ID Number 001664190		2. Exact name of the Limited Liability Company MJM Marine, Newport, LLC				
3. NAICS Code 532490	4. Brief des	4. Brief description of the character of business conducted in Rhode Island LEASING OF MARINE TRANSPORTATION EQUIPMENT				
5. State of Formation RI						
6. Principal Office Address 4 CHIMNEY ROCK ROAD			City Cape Elizabeth	State ME	Zip 04107	
7. Mailing Address of Limited I	iability Compa	iny and Name or	Title of Contact Person			
Contact Name David J. Barber			Contact Title	Contact Title		
Street Address 4 CHIMNEY ROCK ROAD			City Cape Elizabeth	State ME	^{Zip} 04107	
8. List ALL managers (names	and addresse:	s) of the Limited	Liability Company, IF APPLICABL	E - DO NOT LIST N	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
· · · · · · · · · · · · · · · · · · ·	.		<u> </u>	Check the box to it	ndicate an attachment	
9. Resident Agent in Rhode Is	land. This inform	nation is currently	of record with the Department of State	. Changes require filin	g Form 642.	
Under penalty of perjury, I d statements, and that all stat			examined this report, including true and correct.	any accompanyin	g schedules and	
Name of Authorized Person				Date		
David J. Barber				1/29/19		
Signature of Authorized Perso		Sigi	N D/CUMENT HERE			

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**

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FORM 632 - Revised: 10/2017