RI SOS Filing Number: 201988534280 Date: 3/13/2019 10:09:00 AM



State of Rhode Island and Providence Plantations

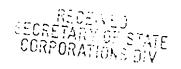
Department of State - Business Services Division

Annual Report for the year. 2019**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.



2019 MAR 13 AM 9: 58

| 1. Entity ID Number | 2. Exact name of the Limited Liability Company | | | | |
|--|--|----------------|---------------------|-------------|----------------------|
| 1656914 | Ultimate Finish Yacht Maintenance, LLC | | | | |
| 3. NAICS Code 811490 | Brief description of the character of business conducted in Rhode Island Yacht Repairs and Restoration | | | | |
| 5. State of Formation RI | | | | | |
| Principal Office Address JH Dwyer Dr. | | | City Middletown | State Ri | Zip 02842 |
| 7. Mailing Address of Limited Lia | bility Compa | ny and Name or | | I | |
| Contact Name Benjamin Wood | | | Contact Title Owner | | |
| Street Address 13 JH Dwyer Dr. | | | City Middletown | State RI | ^{Zip} 02842 |
| 8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS | | | | | |
| Manager Name | | | Manager Name | | |
| Street Address | | | Street Address | | |
| City | State | Zíp | City | State | Zip |
| Manager Name | | | Manager Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | City | State | Zip |
| Check the box to indicate an attachment | | | | | |
| 9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642. | | | | | |
| Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct. | | | | | |
| Name of Authorized Person Date 3 / / | | | | | |
| Benjamin Wood /13 /19 | | | | | |
| Signature of Authorized Person SI SN ENCUMENT HERE | | | | | |

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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

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FORM 632 - Revised: 10/2017