RI SOS Filing Number: 201988864990 Date: 3/18/2019 12:07:00 PM

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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: 2016
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.

1. Entity ID Number	2. Exact name of the Limited Liability Company					
505077	SHORELINK PUBLICATIONS, LLC					
3. NAICS Code 511199	Brief description of the character of business conducted in Rhode Island Marine Publications					
5. State of Formation	1			1		
RI						
6. Principal Office Address			City	State	Zip	
31 West Street			Newport	RI	02842	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name FREDERICK G. HOOD			Contact Title Member			
Street Address 31 West Street			City Newport	State RI	Zip 02840	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS.						
Manager Name Anne Vandromme			Manager Name GOOR			
Street Address 31 West Street			Street Address R CRAC			
City Newport	State RI	Zip 02840	City	State	Zip 30 11 - ₹ 15 11 11 11 11 11 11 11 11 11 11 11 11	
Manager Name			Manager Name $\frac{\frac{-2}{12}}{12} \frac{\Omega}{r_{12}} \frac{\Omega}{r_{23}}$			
Street Address			Street Address Common C			
City	State	Zip	City	State	Zip	
<u> </u>	· · · · · · · · · · · · · · · · · · ·		¹ - · ·	Check the box to ind	licate 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 dec statements, and that all staten				ding any accompanying	schedules and	
Name of Authorized Person FREDERICK G. HOOD				Date	-19	
Signature of Authorized Person						

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