



State of Rhode Island and Providence Plantations

Department of State - Business Services Division

STATE CORPORATION DIV

Annual Report for the year: 2016
Limited Liability Company

2019 JUN -6 PM 1:46

- 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 <u>000 849817</u>		2. Exact name of the Limited Liability Company <u>Connected Ssr Service, LLC</u>	
3. NAICS Code <u>339950</u>		4. Brief description of the character of business conducted in Rhode Island <u>Installation + Repair of SSS</u>	
5. State of Formation <u>CT</u>			
6. Principal Office Address <u>500 Industrial Park Rd</u>		City <u>Deep River</u>	State <u>CT</u>
		Zip <u>06417</u>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>John R Morrison</u>		Contact Title <u>managing member</u>	
Street Address <u>500 Industrial Park Rd</u>		City <u>Deep River</u>	State <u>CT</u>
		Zip <u>06417</u>	
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	City	State
			Zip
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
			Zip
Check the box to indicate an attachment <input type="checkbox"/>			
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 <u>John R Morrison</u>			Date <u>6/6/19</u>
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

JUN 06 2019

BY YNTWH