

# State of Rhode Island and Providence Plantations Office of the Secretary of State

No Fee

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

## Domestic Limited Liability Company Annual Report - Amended

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2019

1. **ID No.** <u>001688892</u>

2. Exact Name of the Limited Liability Company Highpoint Solutions LLC

3. State of Formation

State: RI

#### **ARTICLE III**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here. More information on NAICS can be found online.

532210

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

#### **SECURITY INTEGRATION**

5. Principal Office Address

No. and Street: <u>63 BAKER PINE RD</u>

City or Town: RICHMOND State: RI Zip: 02898 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:

No. and Street: 63 BAKER PINE RD

City or Town: RICHMOND State: RI Zip: 02898 Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country

8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

#### KEVIN WRIGHT 63 BAKER PINE RD RICHMOND, RI 02898

Signed this 12 Day of July, 2019 at 1:56:53 PM by the authorized person. This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

### By KEVIN WRIGHT

Signature of Authorized Person

Form No. 632 Revised 09/07

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