State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year:
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. En In Niver 5542	2. Exact name of the Limited Liability Company Sandwave LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island Owns/ operates seasonal (summer) rental property in Westerly, RI					
5. State of Formation	itate of Formation					
New York						
6. Principal Office Address			City	State	Zip	
n/a - see mailing address below				State	J P	
11/4 See Halling address below						
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Christopher Bourdain			Contact Title Manager			
Street Address 1214 West Boston Post Rd			City Mamaroneck	State NY	^{Zip} 10543	
8. List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Na			Manager Namo			
Street Addre			Street Address			
Ci		538	City Larch-	1	, o	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zıp	
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 hereip are true and correct.						
Name of Authorized Person Date						
Christopher Bourdain	<i>f</i>		Sept 3, 2019			
Signature of Authorized Person	T DAV	7////	2/11/1	, ka		
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MAIL TO:

Division of Business Services

148 W. River Street. Providence, Rhode Island 02904-2615

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