



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

STAMP

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 SECRETARY OF STATE
 USE ONLY

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.

| | | | | | |
|---|-----------------|---|---|------------------------|---------------------|
| 1 Entity ID Number 525657 | | 2 Exact name of the Limited Liability Company Dynasty Electric, LLC | | | |
| 3 NAICS Code 238210 | | 4 Brief description of the character of business conducted in Rhode Island Electrician. | | | |
| 5 State of Formation Rhode Island | | | | | |
| 6 Principal Office Address 475 Taunton Avenue | | | City East Providence | State RI | Zip 02914 |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | | | |
| Contact Name Joseph L. Fortin | | | Contact Title Manager | | |
| Street Address 475 Taunton Avenue | | | City East Providence | State RI | Zip 02914 |
| 8 List ALL managers (names and addresses) of the Limited Liability Company. IF APPLICABLE - DO NOT LIST MEMBERS | | | | | |
| Manager Name Joseph L. Fortin | | | Manager Name Joseph L. Fortin, Jr. | | |
| Street Address 32 Ashlynn Way | | | Street Address 1388 Julians Way | | |
| City Rehoboth | State MA | Zip 02769 | City North Dighton | State MA | Zip 02764 |
| Manager Name | | | Manager Name | | |
| Street Address | | | Street Address | | |
| City | State | Zip | 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 Joseph L. Fortin, Manager | | | | Date 9/29/19 | |
| Signature of Authorized Person  | | | | | |
| SIGN DOCUMENT HERE | | | | | |

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov

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