| | State of Disade Jaland and Dra | | |
|--|--|--|---|
| | Office of the Secreta | ovidence Plantations ary of State | 5 Fee: \$50.00 |
| | Division Of Business 148 W. River S Providence RI 0290 | treet | |
| HOPE | (401) 222-30 | | |
| Limited Liability Con Annual Report Filing Period: September 1 | | | |
| | 7-16-66(d), each limited liability com nin thirty (30) days after the time presc penalty fee of \$25.00. | | |
| ANNUAL REPORT YEAR | : <u>2019</u> | | |
| 1. ID No. <u>00096773</u> | 6 | | |
| 2. Exact Name of the L | imited Liability Company <u>BOUNT</u> | Y LLC | |
| 3. State of Formation | | | |
| State: <u>RI</u> | | | |
| | ARTICLE III | | |
| 0 | Code that best describes the primary re information on <u>NAICS</u> can be found | | e entity. Download |
| <u>999999</u> | | | |
| | | | |
| 4. Brief Description of the | he Character of the Business Which | is Actually Conducted | in Rhode Island |
| | he Character of the Business Which MANAGE, LEASE, CHARTER, A | | |
| TO ACQUIRE, OWN, VESSELS | | AND/OR SELL ONE OI | |
| TO ACQUIRE, OWN, VESSELS | MANAGE, LEASE, CHARTER, A | AND/OR SELL ONE OI | |
| TO ACQUIRE, OWN, VESSELS AND TO ENGAGE IN 5. Principal Office Addre | MANAGE, LEASE, CHARTER, A | AND/OR SELL ONE OI | |
| TO ACQUIRE, OWN, VESSELS AND TO ENGAGE IN 5. Principal Office Address No. and Street: 130 | MANAGE, LEASE, CHARTER, A ALL ACTIVITIES INCIDENTAL ess BELLEVUE AVENUE, | AND/OR SELL ONE OI | |
| TO ACQUIRE, OWN, VESSELS AND TO ENGAGE IN 5. Principal Office Address No. and Street: 130 City or Town: NEV | MANAGE, LEASE, CHARTER, A ALL ACTIVITIES INCIDENTAL ess BELLEVUE AVENUE, | AND/OR SELL ONE OF THERETO. ate: <u>RI</u> Zip: <u>02840</u> | <u>R MORE</u> Country: <u>USA</u> |
| TO ACQUIRE, OWN, VESSELS AND TO ENGAGE IN 5. Principal Office Addre No. and Street: 130 City or Town: <u>NEW</u> 6. Mailing Address of Li Contact Name: Contact | MANAGE, LEASE, CHARTER, A ALL ACTIVITIES INCIDENTAL ess BELLEVUE AVENUE, VPORT Sta imited Liability Company and Name | AND/OR SELL ONE OF THERETO. ate: <u>RI</u> Zip: <u>02840</u> | <u>R MORE</u> Country: <u>USA</u> |
| TO ACQUIRE, OWN, VESSELS AND TO ENGAGE IN 5. Principal Office Address No. and Street: 130 City or Town: NEW 6. Mailing Address of Lite Contact Name: Contact | MANAGE, LEASE, CHARTER, A ALL ACTIVITIES INCIDENTAL ess BELLEVUE AVENUE, VPORT Sta imited Liability Company and Name | AND/OR SELL ONE OF THERETO. ate: <u>RI</u> Zip: <u>02840</u> | <u>R MORE</u> Country: <u>USA</u> |
| TO ACQUIRE, OWN, VESSELS AND TO ENGAGE IN 5. Principal Office Address Mo. and Street: 130 City or Town: NEW 6. Mailing Address of Lit Contact Name: Contact No. and Street: 350 S City or Town: RYE | MANAGE, LEASE, CHARTER, A ALL ACTIVITIES INCIDENTAL ess BELLEVUE AVENUE, VPORT Sta imited Liability Company and Name Title: TUYVESANT AVENUE STUYVESANT AVENUE St f Each Manager of the Limited Liab | AND/OR SELL ONE OF THERETO. ate: <u>RI</u> Zip: <u>02840</u> or Title of Contact Pers ate: <u>NY</u> Zip: <u>10580</u> | <u>R MORE</u> Country: <u>USA</u> son: Country: <u>USA</u> |
| TO ACQUIRE, OWN, VESSELS AND TO ENGAGE IN 5. Principal Office Address No. and Street: 130 City or Town: NEW 6. Mailing Address of Lite No. and Street: 350 S Contact Name: Contact No. and Street: 350 S City or Town: RYE | MANAGE, LEASE, CHARTER, A ALL ACTIVITIES INCIDENTAL ess BELLEVUE AVENUE, VPORT Sta imited Liability Company and Name Title: TUYVESANT AVENUE STUYVESANT AVENUE St f Each Manager of the Limited Liab | AND/OR SELL ONE OF THERETO. ate: <u>RI</u> Zip: <u>02840</u> or Title of Contact Pers ate: <u>NY</u> Zip: <u>10580</u> | <u>R MORE</u> Country: <u>USA</u> son: Country: <u>USA</u> :able. |

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

PETER BRENT REGAN, ESQ. SAYER REGAN & THAYER, LLP 130 BELLEVUE AVENUE NEWPORT , RI 02840

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 17 Day of September, 2019 at 3:52:17 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 <u>PETER BRENT REGAN, ESQ.</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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