	State of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
HOPE	Division Of Business 148 W. River St Providence RI 0290 (401) 222-304	reet 4-2615	
Limited Liability Co	many		
Annual Report Filing Period: September			
	L. 7-16-66(d), each limited liability comp hin thirty (30) days after the time prescr a penalty fee of \$25.00.		
ANNUAL REPORT YEAR	R : <u>2019</u>		
1. ID No. <u>0008468</u>	21		
2. Exact Name of the I	imited Liability Company Manafort	-Precision, LLC	
3. State of Formation			
State: <u>CT</u>			
Enter the six digit NAICS	ARTICLE III	pusiness conducted by the er	ntity Download
the list of codes <u>here.</u> Mo 238110	Code that best describes the primary logical formation on <u>NAICS</u> can be found a	online.	
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8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

<u>CORPORATION SERVICE COMPANY</u> <u>222 JEFFERSON BOULEVARD, SUITE 200</u> <u>WARWICK</u>, <u>RI</u> <u>02888</u>

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

Signed this 20 Day of September, 2019 at 1:01:49 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>MANAFORT BROTHERS INC., ITS MANAGER BRIAN BARRETT, CFO</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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