



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

Fee: \$50.00

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

**Limited Liability Company
Annual Report**

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

ANNUAL REPORT YEAR: 2019

1. ID No. 001685322

2. Exact Name of the Limited Liability Company Linxon US LLC

3. State of Formation

State: DE

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.

237130

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

TURNKEY ELECTRICAL AC SUBSTATION PROJECTS.

5. Principal Office Address

No. and Street: 901 MAIN CAMPUS DRIVE, SUITE 210

City or Town: RALEIGH

State: NC Zip: 27606 Country: USA

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

Contact Name: Contact Title:

No. and Street: 901 MAIN CAMPUS DRIVE, SUITE 210

City or Town: RALEIGH

State: NC Zip: 27606 Country: USA

7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.

DO NOT LIST MEMBERS

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
MANAGER	ANDREA GETCHELL	901 MAIN CAMPUS DRIVE, SUITE 210 RALEIGH, NC 27606 USA
MANAGER	ALEXANDER NICOLAS	901 MAIN CAMPUS DRIVE, SUITE 210

		RALEIGH, NC 27606 USA
MANAGER	C. ERNEST EDGAR IV	901 MAIN CAMPUS DRIVE, SUITE 210 RALEIGH, NC 27606 USA

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

CORPORATE CREATIONS NETWORK INC. 10 DORRANCE STREET #700 PROVIDENCE , RI 02903

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

Signed this 24 Day of September, 2019 at 10:20:07 AM 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 ANDREA GETCHELL
Signature of Authorized Person

Form No. 632
Revised 09/07

© 2007 - 2019 State of Rhode Island and Providence Plantations
All Rights Reserved