	State of Rhode Island Office of the	d and Provid e Secretary		DNS Fee: \$50.00			
	Division (Of Business Ser	vices				
		W. River Stree					
		nce RI 02904-2	2615				
HOPE	(40	01) 222-3040					
Limited Liability C Annual Report	ompany						
Filing Period: September	er 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 YE	AR: <u>2019</u>						
1. ID No. <u>000799899</u>							
2. Exact Name of the Limited Liability Company EVOQUA WATER TECHNOLOGIES LLC							
3. State of Formatio	n						
State: <u>DE</u>							
	AR	TICLE 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 <u>NAICS</u> can be found online.							
<u>221310</u>							
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island							
TO ENGAGE IN THE SALE OF WASTEWATER PRODUCTS AND SERVICES							
5. Principal Office Ac	ldress						
	210 SIXTH AVENUE						
	<u>SUITE 3300</u> PITTSBURGH	State: <u>PA</u>	Zip: <u>15222</u>	Country: <u>USA</u>			
6. Mailing Address o	f Limited Liability Company	[,] and Name or	Title of Contact F	Person:			
Contact Name: PEG	GY HEMINGER Contact Title	: <u>COUN</u> SEL /	AND ASST. CORP	ORATE SECRETARY			
No. and Street: 2	210 SIXTH AVENUE						
	SUITE 3300	Stata: DA	7in. 15000	Country LISA			
City or Town: <u>F</u>	PITTSBURGH	State: PA	Zip: <u>15222</u>	Country: <u>USA</u>			
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS							
Title	Individual Nan	ne	Ado	dress			

First, Middle, Last, Suffix

RONALD C KEATING

MANAGER

Address, City or Town, State, Zip Code, Country

210 SIXTH AVENUE

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IV	IAN	IA	эĿ	к

BENEDICT J STAS

PITTSBURGH, PA 15222 USA

210 SIXTH AVENUE PITTSBURGH, PA 15222 USA

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

CT CORPORATION SYSTEM 450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST PROVIDENCE, RI 02914

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 11:10:08 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 <u>PEGGY HEMINGER</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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