s	tate of Rhode Island and Pro Office of the Secreta		S Fee: \$50.00
	Division Of Business		
	148 W. River St		
	Providence RI 0290		
HOPE	(401) 222-304	+0	
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability comp n thirty (30) days after the time presc penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2019</u>		
<b>1. ID No.</b> <u>001676748</u>	3		
2. Exact Name of the Li	nited Liability Company Pathian,	LLC	
3. State of Formation			
State: <u>CA</u>			
	ARTICLE III		
-	Code that best describes the primary e information on <u>NAICS</u> can be found	-	ne entity. Download
<u>524292</u>			
4. Brief Description of the	e Character of the Business Which	is Actually Conducted	in Rhode Island
ADMINISTRATIVE SE	RVICES		
5. Principal Office Addres	SS		
No. and Street: 3211	0 AGOURA ROAD		
	TLAKE VILLAGE State:	CA Zip: <u>91361</u>	Country: USA
·	nited Liability Company and Name		·
Contact Name: Contact	Title:		
No. and Street: <u>32110</u>	<u>) AGOURA ROAD</u>		
City or Town: <u>WES</u>	TLAKE VILLAGE State:	<u>CA</u> Zip: <u>91361</u>	Country: <u>USA</u>
7. Name and Address of DO NOT LIST MEMBER	Each Manager of the Limited Liab २S	ility Company, if Appli	cable.
Title	Individual Name	Addre	SS
	First, Middle, Last, Suffix	Address, City or Town, Sta	
MANAGER	DAVID A NELSON	32110 AGC WESTLAKE VILLAGE	DURA ROAD , CA 91361 USA
MANAGER	JOHN J NELSON	32110 AGC	URA ROAD

WESTLAKE VILLAGE, CA 91361 USA

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

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK, RI 02888

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

**Signed this 10 Day of October, 2019 at 10:13:11 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 DAVID A. NELSON

Signature of Authorized Person

Form No. 632 Revised 09/07

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