Si	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.
	Division Of Business	Services	
	148 W. River S		
HOPE	Providence RI 0290 (401) 222-30		
imited Liability Com	pany		
iling Period: September 1 -	November 1		
n accordance with R.I.G.L.	7-16-66(d), each limited liability com	bany failing or refusing	
o file its annual report withir 6-66(b&c)) is subject to a p	n thirty (30) days after the time presc penalty fee of \$25.00	ribed by law (R.I.G.L. 7-	
ANNUAL REPORT YEAR:	2019		
1. ID No. <u>001686139</u>			
2. Exact Name of the Lin	nited Liability Company <u>Hashky</u>		
3. State of Formation			
State: <u>RI</u>			
	ARTICLE III		
<u>541715</u>			
4. Brief Description of the	e Character of the Business Which	is Actually Conducted in Rh	ode Island
RESEARCH AND DEV	ELOPMENT IN THE PHYSICAI	2, ENGINEERING, AND LIF	7 <u>E</u>
SCIENCES			
(EXCEPT NANOTECH)	NOLOGY AND BIOTECHNOL	<u>JGT)</u>	
5. Principal Office Addres	S		
No. and Street: ONE RIC	CHMOND SQUARE, SUITE 125	<u>B</u>	
City or Town: <u>PROVID</u>	ENCE	State: <u>RI</u> Zip: <u>02906</u> C	ountry: <u>USA</u>
6. Mailing Address of Lin	nited Liability Company and Name	or Title of Contact Person:	
Contact Name: <u>REGISTE</u>	RED AGENTS INC. Contact Title:		
	CHMOND SQUARE, SUITE 12		
City or Town: <u>PROVID</u>		State: <u>RI</u> Zip: <u>02906</u> C	ounity: <u>USA</u>
7. Name and Address of DO NOT LIST MEMBER	Each Manager of the Limited Liab S	ility Company, if Applicable.	
Title	Individual Name	Address	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip C	Code, Country

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

REGISTERED AGENTS INC. ONE RICHMOND SQUARE, SUITE 125B PROVIDENCE, RI 02906

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

Signed this 16 Day of October, 2019 at 9:15:09 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>RILEY PARK</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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