

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2019

Filing Period: September 1 - November 1 - This report must be typed or printed legibly.

Filing Fee: \$50.00 · FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1 Entity ID No.	2. Exact nam	ne of the limited liabi	lity company			
79630	5 Front L	ine Power Solu	itions, LLC			
3. State of Formation	4. Brief desc	ription of the charac	ter of business conducted in Rhoo	ie Island		
Rhode Island	Ene	Energy Sales (331491)				
5. Principal office address 54 Viking Drive			City Bristol	State RI	^{Z₁p} 02809	
6. MAILING ADDRESS	OF LIMITED LIABILIT	Y COMPANY AND	NAME OR TITLE OF CONTACT	PERSON:		
Contact Name John T. Holmes			Contact Title Sole	Contact Title Sole Member		
Street Address 54 Viking Drive			City Bristol	State RI	Zip 02809	
7. LIST ALL MANAGE ("X" BOX FOR ATT		RESSES) OF THE	LIMITED LIABILITY COMPANY,	F APPLICABLE - DO N	OT LIST MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Ζιρ	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
8. RESIDENT AGENT	IN RHODE ISLAND	·		l		

NOV 2 9 2019 YW

,	
i	File Date
:	Check No
i	Ву:
	FOR SECRETARY OF STATE USE ONLY
l	

Form No. 632 Revised: 01/2012 Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature

11/26/2019 Date

John T. Holmes

Print or Type Name of Authorized Person