RI SOS Filing Number: 201930391390 Date: 12/18/2019 4:00:00 PM



State of Rhode Island and Providence Plantations

## Department of State - Business Services Division

Annual Report for the year: 2019
Limited Liability Company

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

-> Penalty: Additional \$25.00 fee if form is not filed by December 1.

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1. Entity ID Number <b>960383</b>		ne of the Limite y Morni	ng, LLC				
3. NAICS Code	4. Brief desc	4. Brief description of the character of business conducted in Rhode Island					
812990	Yacht Main	Yacht Maintenance					
5. State of Formation Rhode Island					·		
6. Principal Office Address			City	State	Zip		
36 Washington Square			Newport	RI	02840		
7. Mailing Address of Limit	ed Liability Compar	ny and Name o	r Title of Contact Person				
Contact Name John A. Johnson			Contact Title	· · · · · · · · · · · · · · · · · · ·			
Street Address PO Box 127			City Crested Butte	State CO	<sup>Zip</sup> 81224		
8. List ALL managers (nar	nes and addresses	) of the Limited	Liability Company, IF APPLICAB	LE - DO NOT LIST I	MEMBERS		
Manager Name		Manager Name	1				
Street Address		Street Address	Street Address				
City	State	Zip	City	State	Zip		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address	Street Address			
City	Stale	Zip	City	State	Zip		
				Check the box to	indicate an attachment		
9. Resident Agent in Rhoo	de Island. This inform	nation is currently	y of record with the Department of Sta	te. Changes require fill	ng Form 642.		
Under penalty of perjury statements, and that all	, I declare and aff	irm that I have	e examined this report, including	g any accompanyir	ng schedules and		
Name of Authorized Person  John A Jol4 NSON			Date 22	22 Nov 2019			
Signature of Authorized F			GN DOCUMENT HERE		· ·		
L		/					

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov