| s | itate of Rhode Island and Pro Office of the Secreta | | Fee: \$50.00 |
|--|--|----------------------------------|-------------------|
| HORE | Division Of Business 148 W. River St Providence RI 0290 (401) 222-304 | treet 04-2615 | |
| MOPEO | | - | |
| Limited Liability Com Annual Report Filing Period: September 1 | | | |
| | 7-16-66(d), each limited liability comp in thirty (30) days after the time presc penalty fee of \$25.00. | | |
| ANNUAL REPORT YEAR: 2020 | | | |
| 1. ID No. <u>001689166</u> | | | |
| 2. Exact Name of the Limited Liability Company Ligero Technical Services, LLC | | | |
| 3. State of Formation | | | |
| State: <u>TX</u> | | | |
| ARTICLE III | | | |
| - | Code that best describes the primary e information on <u>NAICS</u> can be found | | itity. Download |
| 4. Brief Description of th | e Character of the Business Which | is Actually Conducted in F | hode Island |
| DISTRIBUTOR OF LA | SER SYSTEMS AND OPTICAL | INSPECTION SYSTEM | |
| 5. Principal Office Addre | SS | | |
| No. and Street:3513 SAVOY COURTCity or Town:AUSTINState:TXZip:78738Country:USA | | | |
| 6. Mailing Address of Li | mited Liability Company and Name | or Title of Contact Person | : |
| Contact Name: <u>DOROTHY LAUGHERY</u> Contact Title: <u>PRESIDENT</u> No. and Street: <u>3513 SAVOY COURT</u> | | | |
| City or Town: <u>AUS</u> | TIN State: | <u>TX</u> Zip: <u>78738</u> Cou | intry: <u>USA</u> |
| 7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS | | | |
| Title | Individual Name | Address | |
| | First, Middle, Last, Suffix | Address, City or Town, State, Zi | p Code, Country |
| MANAGER | DOROTHY LAUGHERY | 3513 SAVOY C AUSTIN, TX 78738 | |
| MANAGER | MICHAEL LAUGHERY | 3513 SAVOY C | OURT |

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

INCORP SERVICES, INC. 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 29 Day of January, 2020 at 9:19:20 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>DOROTHY LAUGHERY</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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