	State of R Office of the S	hode Island ecretary of S	state	Fee: \$50.00
	148 W. F Providence F	usiness Service River Street RI 02904-2615 222-3040		
HOPE	× ,	.22-30+0		
Limited Liability Com Annual Report Filing Period: September 1				
	7-16-66(d), each limited liabil n thirty (30) days after the time penalty fee of \$25.00.			
ANNUAL REPORT YEAR:	<u>2020</u>			
1. ID No. <u>001689575</u>				
2. Exact Name of the Limited Liability Company The Goodrich Group LLC				
3. State of Formation				
State: <u>TX</u>				
ARTICLE III				
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.				
<u>454111</u>				
4. Brief Description of th	e Character of the Business	Which is Actu	ally Conducted	l in Rhode Island
ECOMMERCE SALES				
5. Principal Office Addre	SS			
	<u>N BELL BLVD, B4-D</u> AR PARK	State: <u>TX</u>	Zip: <u>78613</u>	Country: <u>USA</u>
6. Mailing Address of Lir	nited Liability Company and	d Name or Title	e of Contact Pe	rson:
	N BELL BLVD, B4-D		- 700/0	0
City or Town: <u>CEDA</u>	<u>AR PARK</u>	State: <u>TX</u>	Zip: <u>78613</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS				
Title	Individual Name First, Middle, Last, Suffix	Addre	Addre	ess ate, Zip 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. 47 WOOD AVE. STE 2 BARRINGTON , RI 02806

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

Signed this 31 Day of July, 2020 at 1:41:26 PM 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 TODD LAMMI

Signature of Authorized Person

Form No. 632 Revised 09/07

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