	State of Rhod Office of the Secre		Fee: \$50.00	
Division Of Business Services				
148 W. River Street				
Providence RI 02904-2615 (401) 222-3040				
HOPE				
Limited Liability Company				
Annual Report Filing Period: September 1 - November 1				
		mpany failing or refusing		
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-				
16-66(b&c)) is subject to a penalty fee of \$25.00.				
ANNUAL REPORT YEAR: 2020				
1. ID No. <u>000849599</u>				
2. Exact Name of the Limited Liability Company NORTH AMERICAN SUBSTATION				
SERVICES, LLC				
3. State of Formation				
State: DE				
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.				
237130				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
MAINTENANCE/REPAIR HIGH VOLTAGE TRANSFORMERS				
5. Principal Office Addres	S			
No. and Street: <u>190 N</u>	ORTH WESTMONTE			
City or Town: <u>ALTA</u>	MONTE SPRINGS	State: <u>FL</u> Zip: <u>32714</u> Court	ntry: <u>USA</u>	
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: ANDREA KOLOFF Contact Title: CONTROLLER				
City or Town: <u>ALTAMONTE SPRINGS</u> State: <u>FL</u> Zip: <u>32714</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	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

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 September, 2020 at 3:04:43 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 <u>DANIEL NICCUM</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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