



**State of Rhode Island  
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company  
Annual Report**

Filing Period: September 1 - November 1

*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.** 000799953

**2. Exact Name of the Limited Liability Company** SOL POWER, LLC

**3. State of Formation**

State: RI

**ARTICLE III**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

238210

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

TURNKEY SOLAR ELECTRIC INSTALLATION AND FULL SERVICE ELECTRICAL CONTRACTOR.

WE INSTALL ROOF AND GROUND MOUNTED SOLAR PANELS, BATTERY BACKUPS, GENERATORS, AND PROVIDE ELECTRICAL WORK.

**5. Principal Office Address**

No. and Street: 803 KINGS FACTORY RD

City or Town: CHARLESTOWN

State: RI

Zip: 02813

Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name: Contact Title:

No. and Street: 11 ALMY STREET

ATTN: ERIC BEECHER

City or Town: PROVIDENCE

State: RI

Zip: 02909

Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.  
DO NOT LIST MEMBERS**

Title	Individual Name	Address
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	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	TYLER MASON	124 OLD MILL ROAD CHARLESTOWN, RI 02813 USA
MANAGER	MAURICIO MERIDA	356 ALLEN AVE WAKEFIELD, RI 02879 USA
MANAGER	ERIC BEECHER	11 ALMY ST PROVIDENCE, RI 02909 USA
MANAGER	BENJAMIN SCHUKNECHT	7 SQUANTUM ST CRANSTON, RI 02920 USA
MANAGER	TODD RILEY	803 KINGS FACTORY RD CHARLESTOWN, RI 02813 USA
MANAGER	ABEL COLLINS	176 SYCAMORE LN WAKEFIELD, RI 02879 USA
MANAGER	CONOR MACMANUS	159 SOUTH WEEDEN ROAD WAKEFIELD, RI 02879 USA

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

ERIC M. BEECHER 11 ALMY STREET PROVIDENCE , RI 02909

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

**Signed this 24 Day of October, 2020 at 1:25:33 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 ERIC BEECHER  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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