	_	State of Rhode I of the Secreta		Fee: \$50.00
		vision Of Business 148 W. River St rovidence RI 0290	reet	
HOPE		(401) 222-304	.0	
Limited Liability Annual Report Filing Period: Septe	<b>y Company</b> ember 1 - November 1			
to file its annual rep	R.I.G.L. 7-16-66(d), each i ort within thirty (30) days a ect to a penalty fee of \$25	after the time prescr		
ANNUAL REPORT	YEAR: <u>2020</u>			
<b>1. ID No.</b> <u>001</u>	694764			
2. Exact Name o	f the Limited Liability Co	ompany <u>Velocity</u>	Platform, LLC	
3. State of Forma	ation			
State: DE				
		ARTICLE III		
-	NAICS Code that best des ere. More information on <u>N</u>			by the entity. Download
4. Brief Description	on of the Character of th	e Business Which	is Actually Conduc	ted in Rhode Island
ASSET	POWER THE OPERAT		HORTHOP PLATI	FORM A DIGITAL
5. Principal Office	Address			
No. and Street:	<u>100 PINE ST</u> <u>SUITE 1250</u>			
City or Town:	SAN FRANCISCO	State: <u>CA</u>	Zip: <u>94111</u>	Country: <u>USA</u>
6. Mailing Addres	s of Limited Liability Co	mpany and Name	or Title of Contact	Person:
Contact Name: <u>E</u> No. and Street:	BRIAN DAVID FARBER CO 100 PINE ST SUITE 1250	ontact Title: <u>COO</u>		
City or Town:	SAN FRANCISCO	State: CA	Zip: <u>94111</u>	Country: <u>USA</u>
7. Name and Add DO NOT LIST M	ress of Each Manager o /IEMBERS	f the Limited Liab	ility Company, if Ap	oplicable.
Title	Individu	ual Name	Ac	Idress

First, Middle, Last, Suffix

**BRIAN DAVID FARBER** 

Address, City or Town, State, Zip Code, Country

100 PINE ST, SUITE 1250 SAN FRANCISCO, CA 94111 USA

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

NORTHWEST REGISTERED AGENT, LLC 47 WOOD AVENUE, SUITE 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 27 Day of October, 2020 at 4:31:44 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 BRIAN STOECKERT

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2020 State of Rhode Island All Rights Reserved