

Annual Report for the year: 2020 Limited Liability Company

Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

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1. Entity ID Number	To 5 .						
	2. Exact name of the Limited Liability Company						
001689326	Onvector LLC						
3. NAICS Code	Brief description of the character of business conducted in Rhode Island						
541712	R&D and design of equipment for treating water and wastewater						
5. State of Formation							
Delaware							
6. Principal Office Address	al Office Address			State	Zip		
c/o NEMIC, 150 Chestnut Street			Providence	RI	02903		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name Daniel J. Cho			Contact Title CEO & Director				
Street Address c/o NEMIC, 150 Chestnut Street			City Providence	State RI	Zip 02903		
8. List ALL managers (names ar	nd addresses)	of the Limited Lia	bility Company, IF APPLICA	BLE - DO NOT LIST	MEMBERS		
Manager Name [)a			Manager Name				
Street Add			Street Address				
City pr	I	. 02703	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
	•		<u>-</u> -	Check the box to i	indicale an attachment		
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642							
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.							
Name of Authorized Person				Date	Date		
Daniel J. Cho				10/02/2	10/02/20		
Signature of Authorized Person							

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov