



State of Rhode Island
Office of the Secretary of State

No Fee

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

Domestic Limited Liability Company
Annual Report - Amended

(Section 7-1.2-1501(e) of the General Laws of Rhode Island, 1956, as amended)

This form is only to be used to amend the current annual report on file with this office.

ANNUAL REPORT YEAR: 2020

1. ID No. 000074067

2. Exact Name of the Limited Liability Company COMPOSITES ONE 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.

424610

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

SALE AND DISTRIBUTION OF COMPOSITE MATERIALS AND REINFORCED PLASTIC MATERIALS

5. Principal Office Address

No. and Street: 955-10 NATIONAL PKWY

City or Town: SCHAUMBURG

State: IL

Zip: 60173

Country: USA

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

Contact Name: CARLIE DOBBECK Contact Title:

No. and Street: 955-10 NATIONAL PKWY

City or Town: SCHAUMBURG

State: IL

Zip: 60173

Country: USA

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	Address Address, City or Town, State, Zip Code, Country
MANAGER	NANCY DEHMLOW	P O BOX 3208 ARLINGTON HEIGHTS, IL 60005 USA
MANAGER	STEVEN L DEHMLOW	P.O. BOX 3208

MANAGER	DAVID P SMITH JR	ARLINGTON HEIGHTS, IL 60005- USA P O BOX 3208 ARLINGTON HEIGHTS, IL 60006 USA
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**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

NANCY DEHMLOW MINTURN FARM ROAD BRISTOL , RI 02809

Signed this 6 Day of February, 2021 at 5:51:00 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 CARLA S DOBBECK
Signature of Authorized Person

Form No. 632
Revised 09/07

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