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State of Rhode Island

Department of State - Business Services Division

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Annual Report for the year: 2015
Limited Liability Company

2021 MAY 10 AH 11: 30 ...

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

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

1. Entity ID Number 000140748	2. Exact name of the Limited Liability Company MIGRANT, LLC					
3. NAICS Code 487210	Brief description of the character of business conducted in Rhode Island MANAGEMENT OF A MOTOR VESSEL					
5. State of Formation RHODE ISLAND						
Principal Office Address Narragansett Blvd			City Portsmouth	State RI	Zip 02871	
7. Mailing Address of Limited Lia		y and Name or Tit				
Contact Name Francis Lee Davidson			Contact Title Manager			
Street Address 189 Narragansett Blvd			City Portsmouth	State RI	^{Zip} 02871	
8. List ALL managers (names a		of the Limited Lia	bility Company, IF APPLICAE	BLE - DO NOT LIST	MEMBERS	
Manager Name Francis Lee Davidson			Manager Name			
Street Address 189 Narragansett Blvd			Street Address			
^{City} Portsmouth	State RI	^{Zip} 02871	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	1			Check the box to i	ndicate an attachment	
9. The Resident Agent informati	on currently of	record with the RI	Department of State is accu	rate. Changes requir	e filing Form 642.	
Under penalty of perjury, I ded statements, and that all stater				g any accompanyin	g schedules and	
Name of Authorized Person				Date	i i	
Francis Lee Davidson				ر. ۲. ک	۵.1	
Signature of Authorized Person	lun					

MAJL TO:

Division of Business Services

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

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

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FORM 632 - Revised: 08/2020