

Annual Report for the year: 2019 **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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2021 JUN TO A 8: 58

1. Entity ID Number	10 Event			-		
001691112		2. Exact name of the Limited Liability Company RockitCoin, LLC				
	ROCKIIL					
3. NAICS Code		4. Brief description of the character of business conducted in Rhode Island TO OPERATE A NETWORK OF PHYSICAL KIOSKS WHERE CUSTOMERS MAY PURCHASE OR SELL CRYPTOCURRENCIES				
522298						
5. State of Formation	PURCHA					
Delawar e						
6, Principal Office Address			City	State	Zlo	
141 West Jackson, Suite 3900			Chicago	IL	60604	
. Mailing Address of Limited I	Jability Comp	any and Name o			*	
Contact Name John Carroll			Contect Title CCO	Contact Title CCO		
Street Address 141 West Jackson, Suite 3900			Crty Chicago	State IL	^{Zip} 60604	
. List ALL managers (names	and addresse	s) of the Limited	Liability Company, IF APPLIC	ABLE - DO NOT LIST	MEMBERS	
Menager Name			Manager Name			
Street Address			Street Address	Street Address		
City	State	Zīp	City	State	Zip	
lanager Name			Manager Name	!	_	
Street Address			Street Address			
idy	State	Zip	City	State	Zip	
	Check the box to indicate an attx					
. The Resident Agent informa	tion currently	of record with th	e RI Department of State is acc	curate. Changes requir	e filing Form 642.	
inder penalty of perjury, I di tatements, and that all state	ociare and aff ements conta	irm that i have Ined herein are	examined this report, including true and correct.	ing any accompanyin	g schedules and	
ame of Authorized Person				Date		
Ben Phillips				06/09/2021		
ignature of Authorized Person	Plu	ODes				
1				-	0.00	

MAIL 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