	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River S Providence RI 0290	treet)4-2615	
(401) 222-3040			
Limited Liability Company			
Annual Report Filing Period: September 1 - November 1			
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.			
ANNUAL REPORT YEAR: 2021			
1. ID No. <u>000752591</u>			
2. Exact Name of the Limited Liability Company Ushers Cove Equity Holdings, LLC			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.			
<u>551112</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
INVESTMENT HOLDINGS			
5. Principal Office Address			
No. and Street: <u>50 NA</u> City or Town: <u>NEWP</u>	<u>RRAGANSETT AVENUE</u> ' <u>ORT</u>	State: <u>RI</u> Zip: <u>02840</u> Coun	try: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: <u>ANGUS DAVIS</u> Contact Title: <u>MANAGER</u> No. and Street: <u>50 NARRAGANSETT AVENUE</u> City of Tauran NEW/DORT			
City or Town: NEWPORT State: RI Zip: 02840 Country: USA			
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Address	
MANAGER	First, Middle, Last, Suffix ANGUS DAVIS	Address, City or Town, State, Zip Cod 50 NARRAGANSETT AVI	ENUE
NEWPORT, RI 02840 USA			

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

HASLAW, INC. 100 WESTMINSTER STREET, SUITE 1500 C/O HINCKLEY ALLEN PROVIDENCE, RI 02903

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 2 Day of November, 2021 at 7:24:10 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 <u>/ANGUS DAVIS/</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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