

R.I. DEPT. OF STATE BUS SVCS DIV

Filing Period: September 1 - November 1
Filing Fee: \$50.00
Penalty: Additional \$25.00 fee if form is not filed by December 1

2021 NOV -8 AM 9: 39

1. Entity ID No. 001682633	2. Exact name of the Limited Liability Company Tri-State Dive Services, LLC						
3. NAICS Code		4. Brief description of the character of business conducted in Rhode Island					
61620	to provi	de dive services					
5 State of Formation Rhode Island	and 1	mooring Serv	(ce)				
6. Principal Office Address 40 Pettasquamsut Avenue			Cuy Narraganse	Cuy Narragansett		71p 02882	
7. Mailing Address of Li Contact Name Nicholas J. Hentschel		ompany and Name or	Title of Contact Person				
Sireel Address 40 Pettasquamsut A	lvenue						
Cuy Narragansett	State R1	21p 02882					
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					1		
8. List ALL managers (n	mes and addresse	s) of the Limited Liabi	ity Company. IF APPLICAB	BLE - DO NOT LIST M	IEMBERS		
Manager Name		· - · · — -	Manager Name				
Nicholas J. Hentschel							
Street Address 40 Pettasquamsut A	\venue		Street Address				
City Narragansett	State RI	Zip 02882	City	State	Zip		
Manager Name			Manager Name		•		
Street Address			Street Address				
City	Store	Zip	City	State	Zip		
	1	L <u></u>		Check the L	ox to indicate a	n attachment	
9. REGISTERED AGEN	T IN RHODE ISI	.AND			- 		
This information is curren	tly of record in the	Office of the Secretary	of State. Changes require fili	ing of Form 642			
Under penalty of perjury, to contained herein are true ar	declare and affirm	that I have examined	this report, including any acc	companying schedules a	and statements, i	and that all statements	
				10-31	- 21		
Signature of Authorized Per-	son			Date			
Confinence of Manufactor Let	chal						
Nicholas J. Hents							
•				FILED			
Nicholas J. Hents Name of Authorized Po	erson			FILED)1		
Nicholas J. Hents	erson : Services	02904-2615		FILED NOV 0 8 202	21 # 121	P	