

Annual Report for the year:	2021
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.

1. Entity ID Number	Entity ID Number 2. Exact name of the Limited Liability Company						
1713621	BIOINNOVATION SYSTEMS, LLC						
3. NAICS Code	Brief description of the character of business conducted in Rhode Island						
541330	ENGINEERING						
5. State of Formation	1						
RHODE ISLAND							
6. Principal Office Address			City	State	Zip		
11 COLUMBINE COURT			SOUTH KINGSTOWN	RI	02879		
7. Mailing Address of Limited Lia		<u>- </u>					
Contact Name THOMAS-ANTHONY R. VISCIONE			Contact Title MEMBER				
Street Address 11 COLUMBINE COURT		City SOUTH KINGSTOWN	State RI	^{Z₁p} 02879			
8. List ALL managers (names ar	nd addresses)	of the Limited Liab	ility Company, IF APPLICABLE - I	DO NOT LIST I	MEMBERS		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Check the box to indicate an attachment							
9. The Resident Agent information	on currently of	record with the RI	Department of State is accurate. C	Changes require	e filing Form 642.		
Under penalty of perjury, I dec statements, and that all statem	lare and affirements contain	m that I have examed herein are true	mined this report, including any and correct.	accompanyin	g schedules and		
Name of Authorized Person				Date	,		
THOMAS-ANTHONY R. VISCIONE							
Signature of Authorized Person	- RM	siare					

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov NOV 8 321

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