	State of Rhode	Island	Fee: \$50.00
	Office of the Secreta		Fee: \$50.00
Division Of Business Services			
148 W. River Street			
	Providence RI 0290		
HOPE	(401) 222-304	+0	
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>001702442</u>			
2. Exact Name of the Limited Liability Company Connecticut Dry Basements, LLC			
3. State of Formation			
State: <u>CT</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>238190</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
WATERPROOFING SERVICES			
5. Principal Office Address			
No. and Street: <u>318 FARMINGTON AVENUE</u>			
City or Town: PLAINVILLE State: CT Zip: 06062 Country: USA			
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: <u>RICHARD L. TAYLOR</u> Contact Title:			
No. and Street: 35 EAST MAIN STREET			
City or Town: <u>AVO</u>	<u>E 359</u> <u>N</u> State	: <u>CT</u> Zip: <u>06001</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Addre	ss
	First, Middle, Last, Suffix	Address, City or Town, Sta	
MANAGER	RICHARD L TAYLOR	35 EAST MAIN ST AVON, CT 060	REET, SUITE 359 001 USA

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

THOMAS R. NOEL 203 SOUTH MAIN STREET, SUITE 2 C/O NOEL LAW 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 30 Day of November, 2021 at 2:53:33 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>/S/ THOMAS R. NOEL</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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