|                                                                                                                                                                                                                 | State of Rhode<br>Office of the Secreta |                                 | Fee: \$50.00            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|---------------------------------|-------------------------|
|                                                                                                                                                                                                                 | Division Of Business                    | Services                        |                         |
|                                                                                                                                                                                                                 | 148 W. River St                         |                                 |                         |
|                                                                                                                                                                                                                 | Providence RI 0290<br>(401) 222-304     |                                 |                         |
| HOPE                                                                                                                                                                                                            | × /                                     |                                 |                         |
| Limited Liability Company<br>Annual Report                                                                                                                                                                      |                                         |                                 |                         |
| Filing Period: September 1                                                                                                                                                                                      | - November 1                            |                                 |                         |
| In accordance with R.I.G.L.                                                                                                                                                                                     | 7-16-66(d), each limited liability com  | oanv 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>000788536</u>                                                                                                                                                                                      |                                         |                                 |                         |
| 2. Exact Name of the Limited Liability Company <u>DISH IT OUT MEDIA LLC</u>                                                                                                                                     |                                         |                                 |                         |
| 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.<br><u>711510</u> |                                         |                                 |                         |
|                                                                                                                                                                                                                 |                                         |                                 |                         |
| 4. Brief Description of th                                                                                                                                                                                      | e Character of the Business Which       | is Actually Conducte            | d in Rhode Island       |
|                                                                                                                                                                                                                 |                                         |                                 |                         |
| DISH IT OUT MEDIA LLC IS AN ONLINE MEDIA AND CONTENT CREATION COMPANY<br>BASED OUT OF                                                                                                                           |                                         |                                 |                         |
| RHODE ISLAND.                                                                                                                                                                                                   |                                         |                                 |                         |
| 5. Principal Office Addre                                                                                                                                                                                       | SS                                      |                                 |                         |
| No. and Street: <u>16 Lo</u>                                                                                                                                                                                    | ONGBROOK DRIVE                          |                                 |                         |
|                                                                                                                                                                                                                 |                                         | te: <u>RI</u> Zip: <u>02864</u> | Country: <u>USA</u>     |
| 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:                                                                                                                            |                                         |                                 |                         |
| Contact Name: ALEX BALCERSKI Contact Title: OWNER                                                                                                                                                               |                                         |                                 |                         |
| No. and Street: <u>16 LONGBROOK DRIVE</u><br>City of Towns CLIMBERLAND State: PL Zin: 02864 Country: LISA                                                                                                       |                                         |                                 |                         |
| City or Town: <u>CUMBERLAND</u> State: <u>RI</u> Zip: <u>02864</u> Country: <u>USA</u>                                                                                                                          |                                         |                                 |                         |
| 7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.<br>DO NOT LIST MEMBERS                                                                                                     |                                         |                                 |                         |
| Title                                                                                                                                                                                                           | Individual Name                         | Addr                            | ess                     |
|                                                                                                                                                                                                                 | First, Middle, Last, Suffix             | Address, City or Town, S        | tate, Zip Code, Country |
|                                                                                                                                                                                                                 |                                         |                                 |                         |

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

ALEXANDER S. BALCERSKI, JR. <u>16 LONGBROOK DRIVE</u> <u>CUMBERLAND</u>, <u>RI</u> <u>02864</u>

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 11:19:36 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 ALEX BALCERSKI JR

Signature of Authorized Person

Form No. 632 Revised 09/07

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