	State of F Office of the S	hode Island ecretary of \$	State	Fee: \$50.00
		Susiness Servic	es	
	148 W.	River Street		
	Providence	RI 02904-2615	5	
1636	(401)	222-3040		
Limited Liability Annual Report Filing Period: Febru				
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 - ENTER THE CURRENT YEAR 2024: 2024				
1. ID No. <u>001694862</u>				
2. Exact Name of the Limited Liability Company <u>SHM NEB, LLC</u>				
3. State of Formation				
State: <u>DE</u>				
NAICS CODE				
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>713930</u>				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
MARINA OPERA	ATIONS			
5. Principal Office	Address			
No. and Street:	14785 PRESTON ROAD,			
City or Town:	<u>SUITE 975</u> DALLAS	State TX	Zip: <u>75254</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
	ontact Title:			
No. and Street:	<u>14785 PRESTON ROAD,</u>			
	SUITE 975			
City or Town:	DALLAS	State: TX	Zip: <u>75254</u>	Country: <u>USA</u>

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

CORPORATION SERVICE COMPANY 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

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

Signed this 23 Day of April, 2024 at 2:09:05 AM 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 JOHN RAY

Signature of Authorized Person

Form No. 632 Revised 09/07

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