	State of Office of the State S	Rhode Island Secretary of		Fee: \$50.00
	Division Of 2	Business Servi	ces	
148 W. River Street				
Providence RI 02904-2615				
1636	(401)	222-3040		
Limited Liability C	company			
Annual Report Filing Period: Februa	ary 1 May 1			
rilling renou. rebrua	iry i - May i			
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>00172</u>	9289			
2. Exact Name of the Limited Liability Company Brooks Automation US, LLC				
3. State of Formati	on			
State: <u>DE</u>				
NAICS CODE				
-	AICS Code that best describes codes <u>here.</u> More information			• •
Island	of the Character of the Busin SCIENTIFIC, AND TECHNI			cted in Rhode
5. Principal Office	Address			
No. and Street:				
City or Town:	<u>15 ELIZABETH DRIVE</u> CHELMSFORD	State: MA	Zip: <u>01824</u>	Country: USA
			<i>Δ</i> ιρ. <u>01024</u>	Country: <u>ODA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
Contact Name: Co				
	15 ELIZABETH DRIVE		- 04004	0
City or Town:	<u>CHELMSFORD</u>	State: MA	Zip: <u>01824</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				

 $\underline{\text{CORPORATION SERVICE COMPANY}}_{222 \text{ JEFFERSON BOULEVARD, SUITE 200}} \underline{\text{WARWICK}}, \underline{\text{RI}}_{02888}$

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 6:48:08 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 <u>CHRISTIANNA REED</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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