	State of Rhode Island Office of the Secretary of St	Fee: \$50.0 ate
	Division Of Business Services 148 W. River Street	
HOPE	Providence RI 02904-2615 (401) 222-3040	
imited Liability Co Annual Report Filing Period: September		
o file its annual report wi	.L. 7-16-66(d), each limited liability company failing ithin thirty (30) days after the time prescribed by la a penalty fee of \$25.00.	
ANNUAL REPORT YEA	<b>R</b> : <u>2020</u>	
1. ID No. <u>0016860</u>	068	
2. Exact Name of the	Limited Liability Company <u>SIGCO LLC</u>	
3. State of Formation		
State: <u>DE</u>		
•	ARTICLE III S Code that best describes the primary business fore information on NAICS can be found online	conducted by the entity. Download
•		conducted by the entity. Download
the list of codes <u>here.</u> M	S Code that best describes the primary business	
the list of codes <u>here.</u> M <u>339999</u> 4. Brief Description of	S Code that best describes the primary business for a local section on <u>NAICS</u> can be found online.	
the list of codes <u>here.</u> M <u>339999</u> 4. Brief Description of MANUFACTURING	S Code that best describes the primary business of lore information on <u>NAICS</u> can be found online. the Character of the Business Which is Actua	
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intermediate 339999   4. Brief Description of   MANUFACTURING   5. Principal Office Add   No. and Street: 4   City or Town: 9   6. Mailing Address of   Contact Name: Conta   No. and Street: 48   City or Town: 9	S Code that best describes the primary business a lore information on NAICS can be found online. the Character of the Business Which is Actual OF INSULATED GLASS WINDOWS Iress <u>8 SPILLER DRIVE</u> VESTBROOK State: <u>ME</u> Zip Limited Liability Company and Name or Title of S SPILLER DRIVE <u>8 SPILLER DRIVE</u> <u>8 SPIL</u> <u>8 SPILLER DRIVE</u> <u>8 SPIL</u> <u>8 SPIL</u>	Illy Conducted in Rhode Island   b: 04092 Country: USA   of Contact Person:   b: 04092 Country: USA
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the list of codes <u>here.</u> M <u>339999</u> <b>4. Brief Description of</b> <u>MANUFACTURING</u> <b>5. Principal Office Add</b> No. and Street: <u>4</u> City or Town: <u>W</u> <b>6. Mailing Address of</b> Contact Name: Conta No. and Street: <u>48</u> City or Town: <u>W</u> <b>7. Name and Address</b>	S Code that best describes the primary business of lore information on <u>NAICS</u> can be found online.    the Character of the Business Which is Actual   OF INSULATED GLASS WINDOWS   Iress   8 SPILLER DRIVE   VESTBROOK State: <u>ME</u> Limited Liability Company and Name or Title   SPILLER DRIVE   SPILLER DRIVE   Of Title:   SPILLER DRIVE   Individual Name	Illy Conducted in Rhode Island   b: 04092 Country: USA   of Contact Person:   b: 04092 Country: USA

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

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

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

**Signed this 14 Day of October, 2020 at 12:09:00 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 GARY P. HICKMAN

Signature of Authorized Person

Form No. 632 Revised 09/07

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