



State of New Hampshire

Department of State

2015 ANNUAL REPORT

Filed

Date Filed: 4/1/2015

Effective Date: 4/1/2015

Business ID: 659050

William M. Gardner

Secretary of State

BUSINESS NAME: **ANCHOR LINE PROJECTS, LLC**

BUSINESS TYPE: **Domestic Limited Liability Company**

BUSINESS ID: **659050**

CITIZENSHIP: **Domestic**

STATE OF FORMATION: **New Hampshire**

CURRENT PRINCIPAL OFFICE ADDRESS

**40 Pleasant St
Portsmouth, NH, 03801, USA**

CURRENT MAILING ADDRESS

**40 Pleasant St
Portsmouth, NH, 03801, USA**

REGISTERED AGENT AND OFFICE

REGISTERED AGENT: **Flaherty, Adam**

REGISTERED AGENT OFFICE ADDRESS: **3370 Lafayette Rd #14 Portsmouth, NH, 03801, USA**

PRINCIPAL PURPOSE(S)

NAICS CODE

OTHER / videography

NAICS SUB CODE

MANAGER / MEMBER INFORMATION

NAME

BUSINESS ADDRESS

TITLE

Adam Flaherty

**40 Pleasant Street, Underground, Portsmouth, NH, 03801,
USA**

Manager

I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief.

Adam Flaherty

Manager

SIGNATURE

TITLE



State of New Hampshire

Department of State

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ONLINE ANNUAL REPORT CONFIRMATION RECEIPT

Business Name: **ANCHOR LINE PROJECTS, LLC**
Type of Request: **Annual Report**

Payment Received: **\$102.00**
Request Date/Time: **4/1/2015 5:02:00 PM**

PAYMENT RECEIPT

Payment Type: **Credit Card**
Payment #: **#####7022**
Billing Amount: **\$102.00**

Payment Transaction #: **19730**
Authorization: **05935C**
Billing Date / Time: **4/1/2015 5:02:00 PM**

Filing Fee: **\$100.00**
Electronic Filing Fee: **\$2.00**
Total Fees: **\$102.00**