RI SOS Filing Number: 200700376940 Date: 08/30/2007 4:00 PM

State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Mollis, *Secretary of State*
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2007

Filing Period: September 1 - November 1 • **Filing Fee:** $50.00

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.

1. ID No.	2. Exact name of the limited liability company
136136	CI CONSULTING, LLC

3. State of Formation	4. Brief description of the character of the business which is actually conducted in Rhode Island
RHODE ISLAND	MANAGEMENT CONSULTING

5. Principal office address	City	State	Zip
15 Bourget Court	N. Smithfield	RI	02896

6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON:

Contact Name	Contact Title
Carmine Iacuone	Manager

Street Address	City	State	Zip
15 Bourget Court	N. Smithfield	RI	02896

7. NAME AND ADDRESS OF EACH MANAGER OF THE LIMITED LIABILITY COMPANY, IF APPLICABLE - DO NOT LIST MEMBERS
FILL IN SPACES BEFORE USING ATTACHMENTS ("X" BOX FOR ATTACHMENT) ☐

Manager Name	Street Address	City	State	Zip
Carmine Iacuone	15 Bourget Court	N. Smithfield	RI	02896

Manager Name	Street Address	City	State	Zip

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

Agent Name	Address	City	Zip
CARMINE IACUONE	15 BOURGET LANE	NORTH SMITHFIELD	02896-

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

[redacted] [redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements, contained herein are true and correct.

Carmine Iacuone 8/27/07
Signature of Authorized Person *Date*

[redacted]

Carmine Iacuone
Print or Type Name of Authorized Person

File Date 8-30-07
Check No. 8401
By: MMC

12919-29-175051
FOR SECRETARY OF STATE USE ONLY

Form 632 Rev. 07/07