RI SOS Filing Number: 200836267080 Date: 10/08/2008 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 2008

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
264837	MEC Promotions, LLC

3. State of Formation	4. Brief description of the character of the business which is actually conducted in Rhode Island
RI	consulting service to promote and market business enterprises

5. Principal office address	City	State	Zip
109 Breakhill Road	West Greenwich	RI	02818

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

Contact Name	Contact Title
Mattew E. Cowell	

Street Address	City	State	Zip
109 Breakhill Road	West Greenwich	RI	02818

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	Manager Name
Mattew E. Cowell	
Street Address	Street Address
109 Breakhill Road	
City: West Greenwich / State: RI / Zip: 02818	City / State / Zip
Manager Name	Manager Name
Street Address	Street Address
City / State / Zip	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	
John S. DiBona, Esq.	145 PHENIX AVENUE	
Address	City: CRANSTON	Zip: 02920

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

[redacted] 264837 [redacted]

File Date	FILED
Check No.	OCT 0 8 2008
By:	By 1048

FOR SECRETARY OF STATE USE ONLY
26907-14-292438

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.

Mattew E. Cowell 10/2/08
Signature of Authorized Person *Date*

[redacted] Matthew E. Cowell, Manager
Print or Type Name of Authorized Person

Form 632 Rev. 07/07