| RALPH MORE State | e of Rhode Island and Pro Office of the Secreta | | Fee: \$50.00 |
|---|--|-------------------------------|---------------------|
| Secretary of State | Division Of Business 148 W. River St Providence RI 0290 (401) 222-304 | reet 4-2615 | |
| Limited Liability Compar Annual Report Filing Period: September 1 - No | | | |
| | 6-66(d), each limited liability comp rty (30) days after the time presc alty fee of \$25.00. | | |
| ANNUAL REPORT YEAR: 20 | <u>12</u> | | |
| 1. ID No. <u>000549672</u> | | | |
| 2. Exact Name of the Limited Liability Company Mind Limitless, LLC | | | |
| 3. State of Formation | | | |
| State: <u>RI</u> | | | |
| 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island | | | |
| | | | |
| TALENT MANAGEMENT & TRAINING CONSULTING | | | |
| 5. Principal Office Address | | | |
| No. and Street: <u>566 SEA</u> | ASIDE DRIVE | | |
| City or Town: JAMES | TOWN State: | <u>RI</u> Zip: <u>02835</u> C | ountry: <u>USA</u> |
| 6. Mailing Address of Limited | d Liability Company and Name | or Title of Contact Pers | on: |
| | IBROSIO Contact Title: PRESI | DENT | |
| No. and Street: <u>PO BC</u> City or Town: <u>JAME</u> | <u>DX 68</u> <u>STOWN</u> State: <u>RI</u> | Zip: <u>02835</u> Cou | ntry: <u>USA</u> |
| 7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS | | | |
| Title | Individual Name | Address | 6 |
| | First, Middle, Last, Suffix | Address, City or Town, State | , Zip Code, Country |
| | | | |
| 8. RESIDENT AGENT IN RHO Changes Require Filing of | | | |
| KRISTY D'AMBROSIO 20 SHADY LEA ROAD NORTH KINGSTOWN, RI 02852 | | | |
| 9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b). | | | |

Signed this 9 Day of November, 2012 at 12:23:32 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 <u>KRISTY DAMBROSIO</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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