



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State - Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

LIMITED LIABILITY COMPANY ANNUAL REPORT FOR THE YEAR 2014

Filing Period: September 1 - November 1 • This report must be typed or printed legibly.

Filing Fee: \$50.00 • FAILURE TO FILE THIS REPORT BY DECEMBER 1 WILL RESULT IN A \$25.00 PENALTY FEE.

1. Entity ID No. 115322		2. Exact name of the limited liability company Veritude LLC			
3. State of Formation DE		4. Brief description of the character of business conducted in Rhode Island temporary staffing			
5. Principal office address 82 Devonshire St		City Boston		State MA	Zip 02109
6. MAILING ADDRESS OF LIMITED LIABILITY COMPANY AND NAME OR TITLE OF CONTACT PERSON					
Contact Name —		Contact Title Secretary			
Street Address 255 State St, Q9B		City Boston		State MA	Zip 02109
7. LIST ALL MANAGERS (NAME AND ADDRESS) OF THE LIMITED LIABILITY COMPANY (IF APPLICABLE. DO NOT LIST MEMBERS) (CHECK BOX FOR ATTACHMENT) ☐					
Manager Name Patricia Murphy		Manager Name			
Street Address 255 State St		Street Address			
City Boston	State MA	Zip 02109	City	State	Zip
Manager Name		Manager Name			
Street Address		Street Address			
City	State	Zip	City	State	Zip
8. RESIDENT AGENT IN RHODE ISLAND					
This information is currently of record in the Office of the Secretary of State. Changes require filing Form 642.					

FILED

OCT 24 2014

BY 12235079

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SECRETARY OF STATE
CORPORATIONS DIV

FOR SECRETARY OF STATE USE ONLY

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.

Matthew Wick

Signature of Authorized Person

10/24/14
Date

Matthew Wick
Print or Type Name of Authorized Person

Form No. 632
Revised: 01/2012