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State of Rhode Island and Providence Plantations

Department of State - Business Services Division

Annual Report for the year: _____QUI U

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by December 1.

Entity ID Number	12 5		1.00			
1	2. Exact name of the Limited Liability Company					
918008	4. Brief description of the character of business conducted in Rhode Island					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
1001	Marketing Consulting business providing Strategic					
5. State of Formation	Formation marketing services to help Build brand, name					
Marketing Consulting business providing Strategic 5. State of Formation marketing services to help Build brand, Name RI rewgnithen and leads I revenue.						
6. Principal Office Address			City	State	Zip	
DEC Eagle Kun			East Greenwich	RI	G2818	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name LISA M. BOWEN			Contact Title PRINUPAL 02518			
Street Address 22 C Eagle Run			East Greenwich	State	Zip Carrie	
o. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
			Che	ck the box to indic	cate an attachment	
9. Resident Agent in Rhode Island. This information is currently of record with the Department of State. Changes require filing Form 642.						
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.						
Name of Authorized Person Date						
Lisa M. Bowen				Octobe	PR 11,2016	
Signature of Authorized Person						
Also M. Buen SIGN DOCUMENT HERE						

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED OCT 2 4 2016

BY 2039