s s	tate of Rhode Island and Pu Office of the Secre		IS Fee: \$50.00
	Division Of Busine 148 W. River		
	Providence RI 02		
(401) 222-3040			
Limited Liability Company			
Annual Report Filing Period: September 1 - November 1			
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.			
ANNUAL REPORT YEAR: 2016			
1. ID No. 000851862			
2. Exact Name of the Limited Liability Company Money Now Merchant Services LLC			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Using the following NAICS codes, please select the code that best describes your business.			
NAICS Code		6	81
			<u>01</u>
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
MONEY NOW MERCHANT SERVICES LLC WOULD HELP A CUSTOMER SET UP A			
BUSINESS WITH A WEB SITE AND OTHER MERCHANT FOR RUNNING THE WEB SITE			
FROM HOME. THEY WOULD RECEIVE A WEB SITE AND TARING TO RUN THE			
BUSINESS FROM HOME OR BUSINESS FOR BETTER SUCCESS.			
5. Principal Office Address			
	MECHANIC STREET		
City or Town: <u>NOR</u>	<u>STH SMITHFIELD</u>	ate: <u>RI</u> Zip: <u>02896</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
Contact Name: Contact Title:			
No. and Street: 190 MECHANIC STREET			
City or Town: NOR	TH SMITHFIELD St	ate: <u>RI</u> Zip: <u>02896</u>	Country: <u>USA</u>
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS			
Title	Individual Name	Addr	ess
	First, Middle, Last, Suffix	Address, City or Town, St	

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

ELIZABETH MYERS 190 MECHANIC STREET NORTH SMITHFIELD , RI 02896

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

Signed this 29 Day of October, 2016 at 4:21:03 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 ELZIABETH MYERS

Signature of Authorized Person

Form No. 632 Revised 09/07

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