s s	tate of Rhode Island and Pro Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River S Providence RI 0290	treet	
HOPE	(401) 222-304	40	
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability comp n thirty (30) days after the time presc penalty fee of \$25.00.	· · · ·	
ANNUAL REPORT YEAR:	<u>2017</u>		
1. ID No. <u>000793192</u>			
2. Exact Name of the Limited Liability Company <u>SHOPPER EVENTS, LLC</u>			
3. State of Formation			
State: <u>DE</u>			
Using the dropdown labeled NAICS Code below, select the classification title that describes the primary type of business in which your entity engages. The box to the right of the dropdown will populate a NAICS Code based on the chosen selection. If the NAICS Code is known, enter it into the box on the right. For further assistance with selecting a classification <u>click here.</u>			
NAICS Code		<u> </u>	<u>00</u>
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island <u>ADVERTISING MATERIAL DISTRIBUTION</u>			
5. Principal Office Addre	SS		
No. and Street: 5100 LEGACY DR			
	ANO State: TX	Z Zip: <u>75024</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:5100 LEGACY DRIVECity or Town:PLANOState: TXZip:75024Country: USA			
		$\frac{11}{10}$ $\frac{15024}{10}$ Country	y. <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	
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Coo	de, Country
1			

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

CAPITOL CORPORATE SERVICES, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

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

**Signed this 24 Day of August, 2017 at 3:23:24 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>BRENT SMITH</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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