State of Rhode Island and Providence Plantations
Department of State - Business Services Division

Annual Report for the year: 2017
Limited Liability Company

→ Filing period: September 1 - November 1
→ Filing Fee: $50.00
→ Penalty: Additional $25.00 fee if form is not filed by December 1.

1. Entity ID Number	2. Exact name of the Limited Liability Company		
151804	Results at Last, LLC		
3. NAICS Code: 541511	4. Brief description of the character of business conducted in Rhode Island: Software development and licensing		
5. State of Formation: Rhode Island			
6. Principal Office Address: ATTN Howard Leavitt, 144 Westminster Street, Suite 200	City: Providence	State: RI	Zip: 02903
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name: Howard Leavitt	Contact Title: Manager		
Street Address: 144 Westminster Street, Suite 200	City: Providence	State: RI	Zip: 02903
8. List **ALL** managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - **DO NOT LIST MEMBERS**			
Manager Name: Howard Leavitt	Manager Name		
Street Address: 144 Westminster Street, Suite 200	Street Address		
City: Providence / State: RI / Zip: 02903	City / State / Zip		
Manager Name	Manager Name		
Street Address	Street Address		
City / State / Zip	City / State / Zip		
Check the box to indicate 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: Howard Leavitt, Manager	Date: September 15, 2017		
Signature of Authorized Person			

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
SEP 19 2017
BY 312785

FORM 632 - Revised: 08/2017