s s	tate of Rhode Island and Pro Office of the Secreta		NS Fee: \$50.00
	Division Of Business 148 W. River S Providence RI 0290	treet 14-2615	
HOPE	(401) 222-30	40	
Limited Liability Com Annual Report Filing Period: September 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: 2017			
1. ID No. <u>001015184</u>			
2. Exact Name of the Limited Liability Company CHALTAS ASSOCIATES, LLC			
3. State of Formation			
State: <u>RI</u>			
ARTICLE III			
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online. <u>541613</u>			
4 Brief Description of th	e Character of the Business Which	is Actually Conduct	ad in Rhode Island
4. Bhei Description of th			
SALES AND MARKETING CONSULTING FIRM			
5. Principal Office Addre	SS		
	LORING AVENUEOVIDENCEState:	<u>RI</u> Zip: <u>02906</u>	Country: <u>USA</u>
6. Mailing Address of Li	mited Liability Company and Name	or Title of Contact P	erson:
Contact Name: ALISON CHALTAS Contact Title: CO-FOUNDER No. and Street: 75 LORING AVENUE			
City or Town: PRC	DVIDENCE State:	RI Zip: <u>02906</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		ress
	First, Middle, Last, Suffix	Address, City or Town,	State, Zip Code, Country
8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER			

Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

ALISON CHALTAS 75 LORING AVENUE PROVIDENCE, RI 02906

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

Signed this 18 Day of October, 2017 at 4:02:06 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 ALISON CHALTAS

Signature of Authorized Person

Form No. 632 Revised 09/07

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