



**State of Rhode Island and Providence Plantations
Office of the Secretary of State**

Fee: \$50.00

Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(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: 2018

1. ID No. 001669908

2. Exact Name of the Limited Liability Company Yaldi Marketing LLC

3. State of Formation

State: RI

ARTICLE III

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

541613

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

YALDI MARKETING IS A STRATEGIC MARKETING SERVICES FIRM DEDICATED TO EMPOWERING MARKETING LEADERS, IN BUSINESS-TO-BUSINESS ENTERPRISES, TO THRIVE IN A DIGITALLY DISRUPTED WORLD. LEVERAGING OUR DEPTH OF CORPORATE MARKETING, CONSULTING AND AGENCY EXPERIENCE WE ARE ABLE TO DEVELOP AND EXECUTE TRANSFORMATIVE MARKETING SOLUTIONS THAT PRODUCE MEASURABLY BETTER RESULTS. WHAT'S MORE, COMPRISED OF FOUR DISTINCT PRACTICE AREAS, WE OFFER OUR CLIENTS THE RANGE OF SERVICES THEY NEED TO COMPETE AND WIN.

5. Principal Office Address

No. and Street: 805 MIDDLE ROAD

City or Town: PORTSMOUTH

State: RI

Zip: 02871

Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: SCOTT RUSSELL Contact Title: FOUNDER
No. and Street: 805 MIDDLE ROAD
City or Town: PORTSMOUTH State: RI Zip: 02871 Country: USA

**7. Name and Address of Each Manager of the Limited Liability Company, if Applicable.
DO NOT LIST MEMBERS**

Title	Individual Name First, Middle, Last, Suffix	Address Address, City or Town, State, Zip Code, Country
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**8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

SCOTT RUSSELL 805 MIDDLE ROAD PORTSMOUTH , RI 02871

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

Signed this 20 Day of September, 2018 at 4:24:38 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 SCOTT RUSSELL
Signature of Authorized Person

Form No. 632
Revised 09/07