

Annual Report for the year: 2019
Limited Liability Company

FILED (N) SEP 0 9 2019

1)]

→ 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 1674135	l l	2. Exact name of the Limited Liability Company Amoria Consulting, LLC				
3. NAICS Code 541612		Brief description of the character of business conducted in Rhode Island To engage in any lawful business				
5. State of Formation RHODE ISLAND		_				
Principal Office Address Cavalcade Boulevard			City Warwick	State RI	Zip 02889	
7. Mailing Address of Limited	Liability Compa	any and Name o				
Contact Name Victoria Uustal			Contact Title Member	Contact Title Member		
Street Address 25 Cavalcade Boulevard			City Warwick	State RI	^{Zip} 02889	
8. List ALL managers (names	and addresse	s) of the Limited	Liability Company, IF APPLICA	ABLE - DO NOT LIST I	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address	Street Address		
City	State	Zip	City	State	Zip	
	•			Check the box to it	ndicate an attachment	
9. Resident Agent in Rhode Is	land. This infor	nation is currently	of record with the Department of S	tate. Changes require filin	g Form 642.	
Under penalty of perjury, I d statements, and that all stat	eclare and afferments conta	firm that I have ined herein are	examined this report, includi true and correct.	ing any accompanyin	g schedules and	
Name of Authorized Person				Date	•	
Victoria Uustal				919	5/19	
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