RI SOS Filing Number: 201925193910 Date: 10/23/2019 4:00:00 PM



State of Rhode Island and Providence Plantations

## **Department of State - Business Services Division**

Annual Report for the year: 2019 **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.

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			Brief description of the character of business conducted in Rhode Island     MARKETING				
pal Office Address			State	Zip			
64 ATLANTIC AVE			RI	02907			
	y and Name o						
Contact Name IDREES AJAKAIYE			Contact Title PRESIDENT				
Street Address 64 ATLANTIC AVE			State RI	<sup>Zıp</sup> 02907			
d addresses)	of the Limited	Liability Company, IF APPLICABI	E - DO NOT LIST	MEMBERS			
Manager Name			Manager Name				
Street Address		Street Address	Street Address				
State	Zip	City	State	Zip			
Manager Name			Manager Name				
Street Address			Street Address				
State	Zip	City	State	Zip			
<u> </u>	<b>t</b>	•	Check the box to	indicate an attachment			
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			any accompanyin	g schedules and			
Name of Authorized Person				Date			
IDREES AJAKAIYE			10-21-2019				
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	State  State  d. This informal are and affir	State Zip  State Zip  d. This information is currently lare and affirm that I have lents contained herein are	City PROVIDENCE  d addresses) of the Limited Liability Company, IF APPLICABL  Manager Name  Street Address  City  Manager Name  Street Address  State  Zip  City  Manager Name  Street Address  City  City  Manager Name  Street Address  City  d. This information is currently of record with the Department of State	PROVIDENCE  PROVIDENCE  Contact Title of Contact Person  Contact Title PRESIDENT  City PROVIDENCE  State RI  d addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST  Manager Name  Street Address  State  Zip  City  State  Manager Name  Street Address  State  Zip  City  State  Check the box to  d. This information is currently of record with the Department of State. Changes require filinger and affirm that I have examined this report, including any accompanying tents contained herein are true and correct.  Date  [P - 2			

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 C

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