	Off	State of Rhe			Fee: \$50.0		
		Division Of Bus	siness S	Services			
		148 W. Ri	ver Str	reet			
		Providence RI	02904	1-2615			
HOPE		(401) 22	2-3040	0			
Limited Liability ( Annual Report Filing Period: Septemb							
In accordance with R.I to file its annual report 16-66(b&c)) is subject	t within thirty (30) da	ys after the time					
ANNUAL REPORT Y	EAR: <u>2020</u>						
1. ID No. <u>00169</u>	04876						
2. Exact Name of the Limited Liability Company Soljane Martinez Consulting LLC							
3. State of Formation	on						
State: <u>RI</u>							
		ARTICLE	EIII				
Enter the six digit NA the list of codes <u>here</u> .		•			by the entity. Download		
4. Brief Description	of the Character of	f the Business V	Which i	is Actually Condu	cted in Rhode Island		
EDUCATIONAL C	CONSULTING SE	RVICES INCL	UDIN	G TEACHER PRO	OFESSIONAL		
DEVELOPMENT,		ZODONSIVE DE		OCV DESTODAT	FIVE HISTICE AND		
ALL	<u>ULIUKALLI KE</u>	SFONSIVE FE	DAU	JUI, KESIOKA	<u>FIVE JUSTICE AND</u>		
AREAS RELATED	TO EDUCATION	<u>J.</u>					
5. Principal Office A	ddress						
No. and Street:	8 IVY DR.						
City or Town:	COVENTRY	State: <u>RI</u>	Zip:	02816-8528	Country: <u>USA</u>		
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:							
Contact Name: SOLJANE MARTINEZ Contact Title: FOUNDER							
No. and Street:	<u>8 IVY DR.</u>		~				
City or Town:	COVENTRY	State: <u>RI</u>	Zip: <u>0</u>	2816-8528	Country: <u>USA</u>		
7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS							
Title	Indiv	vidual Name		Α	ddress		

First.	Middle,	Last.	Suffix
1 11 51,	maulo,	Luoi,	Ounix

## 8. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

<u>UNITED STATES CORPORATION AGENTS, INC.</u> <u>222 JEFFERSON BOULEVARD, SUITE 200</u> <u>WARWICK</u>, <u>RI</u> <u>02888</u>

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

**Signed this 27 Day of October, 2020 at 11:36:40 AM 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 SOLJANE MARTINEZ

Signature of Authorized Person

Form No. 632 Revised 09/07

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