	State of Rhode Office of the Secreta		Fee: \$50.00
	Division Of Business 148 W. River S Providence RI 029 (401) 222-20	treet)4-2615	
HOPE	(401) 222-30	40	
Limited Liability Com Annual Report Filing Period: September 1			
	7-16-66(d), each limited liability com in thirty (30) days after the time presc penalty fee of \$25.00.		
ANNUAL REPORT YEAR:	<u>2020</u>		
1. ID No. <u>001696364</u>	4		
2. Exact Name of the Limited Liability Company Strategic Consulting Services, LLC			
3. State of Formation			
State: <u>RI</u>			
	Code that best describes the primary e information on <u>NAICS</u> can be found		y the entity. Download
	e Character of the Business Whicl	is Actually Conduct	ted in Rhode Island
CONSULTING SERVI	CES		
5. Principal Office Addre	SS		
	JOSHUA COURT ARWICK State:	<u>RI</u> Zip: <u>02889</u>	Country: <u>USA</u>
6. Mailing Address of Li	mited Liability Company and Name	or Title of Contact	Person:
No. and Street: 11 J	DTO Contact Title: <u>MEMBER</u> IOSHUA COURT		
City or Town: WA	<u>RWICK</u> State:	<u>RI</u> Zip: <u>02889</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		dress
	First, Middle, Last, Suffix	Address, City or Town,	State, Zip Code, Country
8. RESIDENT AGENT IN I	RHODE ISLAND - DO NOT ALTER		

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

EDWARD F GROURKE 24 SPRING STREET PAWTUCKET, RI 02860

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

Signed this 30 Day of October, 2020 at 1:51:44 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 <u>IVAN SOTO</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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