



Department of State - Business Services Division

Annual Report for the year: 2020
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.

RECEIVED
R.I. DEPT. OF STATE
BUS SVCS DIV
2021 APR 23 AM 11:37

1. Entity ID Number <u>000615870</u>		2. Exact name of the Limited Liability Company <u>PAULINE MANN CONSULTING</u>	
3. NAICS Code <u>511199</u>		4. Brief description of the character of business conducted in Rhode Island <u>EDUCATIONAL CONSULTING, EVENT PLANNING, SYSTEMS ORGANIZATION, YOGA</u>	
5. State of Formation <u>RI</u>			
6. Principal Office Address <u>51 CADY AVE</u>		City <u>WARWICK</u>	State <u>RI</u> Zip <u>02889</u>
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>PAULINE MANN GENEST</u>		Contact Title <u>OWNER</u>	
Street Address <u>51 CADY AVE</u>		City <u>WARWICK</u>	State <u>RI</u> Zip <u>02889</u>
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS			
Manager Name <u>N/A</u>		Manager Name <u>N/A</u>	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Manager Name		Manager Name	
Street Address		Street Address	
City	State	City	State
Zip		Zip	
Check the box to indicate an attachment ☐			
9 The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.			
Name of Authorized Person <u>PAULINE MANN GENEST</u>		Date <u>2/2/2020</u>	
Signature of Authorized Person <u>Pauline Mann Genest</u>			

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
APR 23 2021
KL ZB5F5
1139