RI SOS Filing Number: 202103023670 Date: 10/8/2021 4:00:00 PM



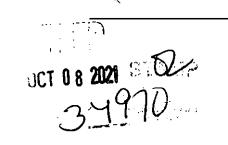
## **Department of State - Business Services Division**

## Annual Report for the year: 2021 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.



1. Entity ID Number	2. Exact name of the Limited Liability Company					
1707122	ZAMERAT, LLC					
3. NAICS Code	Brief description of the character of business conducted in Rhode Island					
541870	Digital marketing/advertising.					
5. State of Formation	7					
Rhode Island						
6. Principal Office Address	<b>!</b>		City	State	Zip	
90 Bismark Street			Providence	RI	02904	
7. Mailing Address of Limited Li	ability Compa	any and Name o	r Title of Contact Person	•		
Contact Name Cristoffer Perez			Contact Title Authorized I	Contact Title Authorized Rep. of Bismark Financial Group, LLC		
Street Address 90 Bismark Street			City Providence	State RI	<sup>Zip</sup> 02904	
8. List ALL managers (names a	and addresse	s) of the Limited	Liability Company, IF APPLICAL	BLE - DO NOT LIST	MEMBERS	
Manager Name			Manager Name	Manager Name		
Street Address			Street Address			
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zip	
		I		Check the box to	indicate an attachment	
9. The Resident Agent informat	ion currently	of record with th	e RI Department of State is accu	ırate. Changes requi	ire filing Form 642.	
Under penalty of perjury, I de statements, and that all state			examined this report, including true and correct.	g any accompanyi	ng schedules and	
Name of Authorized Person				Date Ca	1-11/01	
Cristoffer Perez, Authorized	Representa	tive of Bismarl	k Financiał Group, LLC	9	124 121	
Signature of Authorized Person	N	Portes	2			
	4					

MAIL TO:

**Division of Business Services** 

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov