

## **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.

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1. Entity ID Number 1665397		2. Exact name of the Limited Liability Company  Avenger Ventures, LLC					
3. NAICS Code							
323111		Brief description of the character of business conducted in Rhode Island					
323111	Creation,	Creation, development, editing and consulting of digital media.					
5. State of Formation							
RI							
6. Principal Office Address	·•	· ·	City	State	Zip		
180 Candy Apple Lane			Saunderstown	RI	02874		
7. Mailing Address of Limited		ny and Name or	Title of Contact Person		I		
Contact Name Matthew Graul			Contact Title Member	Contact Title Member			
Street Address 160 Candy Apple Lane		City Saunderstown	State RI	Zip 02874			
8. List ALL managers (name	s and addresse	s) of the Limited	Liability Company, IF APPLICABL	E - DO NOT LIST	MEMBERS		
Manager Name	r Name		Manager Name	Manager Name			
Street Address		Street Address	Street Address				
City	State	Zip	City	State	Zip		
Manager Name			Manager Name	Manager Name			
Street Address			Street Address	Street Address			
City	State	Zip	City	State	Zip		
	· · ·	<u> </u>		Check the box to	indicate an attachment		
9. The Resident Agent inform	ation currently (	of record with the	RI Department of State is accura	ite. Changes requir	re filing Form 642.		
Under penalty of perjury, I statements, and that all sta	declare and aff tements conta	īrm that I have d ined herein are	examined this report, including true and correct.	any accompanyin	g schedules and		
Name of Authorized Person  MATTHOW GRAVE  Date  10/9/31							
Signature of Authorized Pers	on $\mathcal{U}$	411	1		<del>/</del>		
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MAIL TO:

Division of Business Services

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

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