		of Rhode Island		Fee: \$50.00
	Division	Of Business Se	ervices	
	-	W. River Stree		
1636		ence RI 02904- 01) 222-3040	2615	
Limited Liability C Annual Report Filing Period: Februa	ary 1 - May 1			
refusing to file its an	R.I.G.L. 7-16-66(d), each lim nual report within thirty (30, S(b&c)) is subject to a penal	) days after the	time prescribed	by
ANNUAL REPORT	(EAR: <u>2023</u>			
1. ID No. <u>00168</u>	2202			
2. Exact Name of t	he Limited Liability Compa	ny <u>S. Roberts</u>	LLC	
3. State of Formati	on			
State: <u>RI</u>				
	AI	RTICLE III		
	AICS Code that best descril codes <u>here.</u> More informat			
<u>541618</u>				
4. Brief Descriptior Island	of the Character of the Bu	isiness Which	is Actually Con	ducted in Rhode
	RAINING AND COACHI	<u>NG IN LEAD</u>	<u>ERSHIP</u>	
CONSULTING T				
5. Principal Office	Address			
	Address <u>18 CATALPA WAY</u>			
5. Principal Office		State: <u>RI</u>	Zip: <u>02816</u>	Country: <u>USA</u>
5. Principal Office No. and Street: City or Town:	<u>18 CATALPA WAY</u>			•
<ul> <li>5. Principal Office</li> <li>No. and Street:</li> <li>City or Town:</li> <li>6. Mailing Address</li> <li>Contact Name: <u>SC</u></li> </ul>	<u>18 CATALPA WAY</u> <u>COVENTRY</u> of Limited Liability Compa	iny and Name o	or Title of Conta	•
<ul> <li>5. Principal Office</li> <li>No. and Street:</li> <li>City or Town:</li> <li>6. Mailing Address</li> </ul>	<u>18 CATALPA WAY</u> <u>COVENTRY</u> of Limited Liability Compa	iny and Name o	or Title of Conta	•
<ul> <li>5. Principal Office</li> <li>No. and Street:</li> <li>City or Town:</li> <li>6. Mailing Address</li> <li>Contact Name: SC</li> <li>No. and Street:</li> <li>City or Town:</li> <li>7. RESIDENT AGEN</li> </ul>	<u>18 CATALPA WAY</u> <u>COVENTRY</u> of Limited Liability Compa COTT ROBERTS Contact Ti <u>18 CATALPA WAY</u>	itle: <u>PRESIDE</u> State: <u>RI</u> NOT ALTER	or Title of Conta	ct Person:

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

**Signed this 29 Day of January, 2023 at 5:42:51 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 SCOTT ROBERTS

Signature of Authorized Person

Form No. 632 Revised 09/07

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