RI SOS Filing Number: 202327706760 Date: 2/7/2023 9:03:00 AM



State of Rhode Island

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

STAMP

Annual Report for the year: <u>2002</u> Limited Liability Company

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

-> Penalty: Additional \$25.00 fee if form is not filed by May 31.

2023 FEB - T A 8 58

1. Entity ID Number	2. Exact name of the Limited Liability Company			
001676403	Simplified Impact LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
541613 5. State of Formation	Marketing Consulting Firm			
Rhode Island		_		
6. Principal Office Address		City	State	Zip
21 Orchard	Ave.	Narragansett	RI	D3887
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Haria Rounes Contact Title (80)				
Street Address al Orchard Ave.		Cay Narragansett	State R1	2ip 02882
8. 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			Date	
Ana	λ	02/0	6 2023	
Signature of Authorized Person  Lua Waria Rounes  Od 06 2023				
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**FILED** 

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MAIL TO:

**Division of Business Services** 

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

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

Suite 14

ocel entrance

FORM 632 - Revised: 11/2021