



State of Rhode Island
Department of State - Business Services Division

STAMP

Annual Report for the year: 2021
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.

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 BUS SVCS DIV
 2023 FEB -7 A 8:58

1. Entity ID Number 001676403		2. Exact name of the Limited Liability Company Simplified Impact LLC			
3. NAICS Code 541613		4. Brief description of the character of business conducted in Rhode Island Marketing Consulting Firm			
5. State of Formation Rhode Island					
6. Principal Office Address 21 Orchard Ave.		City Narragansett	State RI	Zip 02882	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Ana Maria Raynes		Contact Title CEO			
Street Address 21 Orchard Ave.		City Narragansett	State RI	Zip 02882	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.					
<i>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.</i>					
Name of Authorized Person Ana Maria Raynes				Date 02/06/2023	
Signature of Authorized Person <i>Ana Maria Raynes</i>					

FILED

FEB 07 2023
 BY ML 05505
 9:02

MAIL TO:
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