



State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2019
 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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 R.I. DEPT. OF STATE
 BUS SVCS DIV
 2023 FEB -7 A 8:58

1. Entity ID Number <u>00676403</u>		2. Exact name of the Limited Liability Company <u>Simplified Impact LLC</u>	
3. NAICS Code <u>541613</u>		4. Brief description of the character of business conducted in Rhode Island <u>Marketing consulting firm.</u>	
5. State of Formation <u>Rhode Island</u>			
6. Principal Office Address <u>21 Orchard Ave.</u>		City <u>Narragansett</u>	State <u>RI</u>
		Zip <u>02882</u>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <u>Ana Maria Raynes</u>		Contact Title <u>CEO / Founder</u>	
Street Address <u>21 Orchard Ave.</u>		City <u>Narragansett</u>	State <u>RI</u>
		Zip <u>02882</u>	
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 <u>Ana Maria Raynes</u>		Date <u>02/06/2023</u>	
Signature of Authorized Person <u>Ana Maria Raynes</u>			

FILED

FEB 07 2023
 BY ML 055QS
9:00

MAIL TO:

Division of Business Services

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