

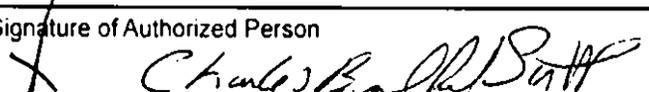


State of Rhode Island
Department of State - Business Services Division

**FILED
 STAMP**
 MAR 06 2023
 BY 2508
 [Signature]

Annual Report for the year: 2023
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.

1. Entity ID Number 1694757		2. Exact name of the Limited Liability Company Promise Financial, LLC			
3. NAICS Code 522291		4. Brief description of the character of business conducted in Rhode Island Lending			
5. State of Formation RI					
6. Principal Office Address 777 Taunton Avenue		City East Providence	State RI	Zip 02914	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Charles Bradford Scott		Contact Title Member			
Street Address 5 Brayton Meadow		City East Greenwich	State RI	Zip 02818	
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 Charles Bradford Scott				Date 2/27/2023	
Signature of Authorized Person 					

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov