State of Rhode Island Office of the Secretary of State Fee: \$50.00 Office of the Secretary of State Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040 Limited Liability Company Annual Report Filing Period: February 1 - May 1 In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee dis25.00 ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024 1. ID No. 000664970 2. Exact Name of the Limited Liability Company NC3 LLC 3. State of Formation State: DE NAICS CODE Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes here, More information on NAICS can be found online. 541612 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island RECRUITMENT FACILITATOR 5. Principal Office Address No. and Street: <u>55 PAWTUCKET AVE. BUILDING D</u>						
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5. Principal Office Address No. and Street: 55 PAWTUCKET AVE.						
No. and Street: <u>55 PAWTUCKET AVE.</u>	RECRUITMEN	T FACILITATOR				
55 TAW TOCKET AVE.	5. Principal Offic	e Address				
BUILDING D	No. and Street:					
City or Town:RUMFORDState: RIZip: 02916Country: USA	City or Town:		State: <u>RI</u>	Zip: <u>02916</u>	Country: <u>USA</u>	
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:						
Contact Name: <u>SAMUEL ISERSON</u> Contact Title: No. and Street: <u>55 PAWTUCKET AVE.</u> <u>BUILDING D</u>	-	55 PAWTUCKET AVE.	9:			
City or Town: RUMFORD State: RI Zip: 02916 Country: USA	City or Town:		State: <u>RI</u>	Zip: <u>02916</u>	Country: <u>USA</u>	

7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

SAMUEL ISERSON 55 PAWTUCKET AVENUE, BUILDING D RUMFORD , RI 02916

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

Signed this 25 Day of January, 2024 at 2:35:53 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 SAMUEL ISERSON

Signature of Authorized Person

Form No. 632 Revised 09/07

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