	State of Office of the	Rhode Islan Secretary o		Fee: \$50.00
Division Of Business Services				
148 W. River Street				
Providence RI 02904-2615				
1636	(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 of \$25.00.				
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024				
1. ID No. <u>001680704</u>				
2. Exact Name of the Limited Liability Company Simple Living Strategies, LLC				
3. State of Formation				
State: <u>RI</u>				
NAICS CODE				
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.				
<u>561990</u>				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
PROFESSIONAL ORGANIZER - RESIDENTIAL				
5. Principal Office Address				
	<u>9 TAUNTON AVE</u> PT 1			
_	AST PROVIDENCE	State: <u>RI</u>	Zip: <u>02914</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
	A DAFONTE Contact Title:	<u>OWNER</u>		
<u></u>	<u>) TAUNTON AVE</u> AST PROVIDENCE	State: <u>RI</u>	Zip: <u>02914</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				

## ELENA DAFONTE 99 TAUNTON AVE EAST PROVIDENCE , RI 02914

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

**Signed this 5 Day of March, 2024 at 4:31:51 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 <u>ELENA DAFONTE</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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