

State of Rhode Island  
 Department of State - Business Services Division

**FILED**  
 APR 10 2024  
 BY *106*

Annual Report for the year: 2024  
 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 <b>001757847</b>		2. Exact name of the Limited Liability Company <b>DAVID FLAVIN COACHING, LLC</b>	
3. NAICS Code <b>812990</b>		4. Brief description of the character of business conducted in Rhode Island <b>LIFE COACHING</b>	
5. State of Formation <b>RHODE ISLAND</b>			
6. Principal Office Address <b>20 NORMAN AVENUE</b>		City <b>CRANSTON</b>	State <b>RI</b>
Zip <b>02910</b>			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name <b>DAVID W. FLAVIN</b>		Contact Title <b>MEMBER</b>	
Street Address <b>20 NORMAN AVENUE</b>		City <b>CRANSTON</b>	State <b>RI</b>
Zip <b>02910</b>			
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. <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 <b>DAVID W. FLAVIN</b>			Date <b>4/5/24</b>
Signature of Authorized Person <i>[Handwritten Signature]</i>			

**MAIL TO:**  
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