State of Rhode Island Office of the Secretary of State	Fee: \$50.00
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 of \$25.00.	
ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR <b>2024</b> : <u>2024</u>	
1. ID No. <u>001722872</u>	
2. Exact Name of the Limited Liability Company $\underline{MM FLYING CIRCUS, LLC}$	
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>611512</u>	
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island	
MISCELLANEOUS FLIGHT TRAINING IN STUDENT/OWNER SUPPLIED AIRCRAFT	
5. Principal Office Address	
No. and Street: <u>88 MAWNEY ST</u> City or Town:EAST GREENWICHState: RIZip: 02818Co	untry: <u>US</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:	
Contact Name: MICHAEL MAYER Contact Title: MEMBER   No. and Street: 88 MAWNEY ST   City or Town: EAST GREENWICH State: RI Zip: 02818 Cou	ntry: <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 MICHAEL MAYER 88 MAWNEY ST EAST GREENWICH , RI 02818	

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

**Signed this 30 Day of April, 2024 at 12:05:31 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>MICHAEL MAYER</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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