		of Rhode Islan ne Secretary o		Fee: \$50.00
		Of Business Serv		
	148	W. River Street		
	Provide	nce RI 02904-26	515	
1636	(4	01) 222-3040		
Limited Liability Annual Report Filing Period: Febr				
refusing to file its a	R.I.G.L. 7-16-66(d), each lim annual report within thirty (30) 66(b&c)) is subject to a penal	days after the til		у У
ANNUAL REPORT	YEAR - ENTER THE CURRE	NT YEAR 2024 :	: <u>2024</u>	
1. ID No. <u>000526601</u>				
2. Exact Name of the Limited Liability Company <u>THE CAPACITY GROUP LLC</u>				
3. State of Forma	ation			
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>541618</u>				
4. Brief Descriptie Island	on of the Character of the Bu	isiness Which is	Actually Condu	ucted in Rhode
CONSULTING BUSINESS WHICH CONDUCTS BUSINESS PLANNING, MARKET				
RESEARCH, FUND DEVELOPMENT AND OTHER BUSINESS CONSULTING SERVICES				
ON BEHALF OF CLIENTS.				
5. Principal Office	e Address			
5. Principal Office	<u>300 DOYLE AVENUE</u>			
		State: <u>RI</u>	Zip: <u>02906</u>	Country: <u>USA</u>
No. and Street: City or Town:	300 DOYLE AVENUE			
No. and Street: City or Town: 6. Mailing Addres Contact Name: J	300 DOYLE AVENUE PROVIDENCE ss of Limited Liability Compa			
No. and Street: City or Town: 6. Mailing Addres	300 DOYLE AVENUE PROVIDENCE			

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

JULIE DIBARI 300 DOYLE AVENUE PROVIDENCE , RI 02906

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 2:59:30 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 JULIE DIBARI

Signature of Authorized Person

Form No. 632 Revised 09/07

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