



State of Rhode Island  
Department of State - Business Services Division

REC'D RIDOS BSD  
24 MAY 30 PM 1:08:08

Annual Report for the year: 2021

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<br>001690324  |  | 2. Exact name of the Limited Liability Company<br>Method LLC  |             |
| 3. NAICS Code<br>524210   |  | 4. Brief description of the character of business conducted in Rhode Island<br>Non Resident Insurance Agency for Profit |             |
| 5. State of Formation<br>NV   |  |   |             |
| 6. Principal Office Address<br>13810 FNB Parkway, Suite 450   |  | City<br>Omaha   | State<br>NE |
|   |  | Zip<br>68154  |             |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person   |  |   |             |
| Contact Name<br>Christopher Daley   |  | Contact Title<br>Manager/President  |             |
| Street Address<br>13810 FNB Parkway, Suite 450  |  | City<br>Omaha   | State<br>NE |
|   |  | Zip<br>68154  |             |
| 8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.   |  |   |             |
| 9. 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. |  |   |             |
| Name of Authorized Person<br>CHRISTOPHER DALEY  |  | Date<br>5-21-24   |             |
| Signature of Authorized Person<br><i>Chris Daley</i>  |  |   |             |

MAIL TO:

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MTB FILED 109  
MAY 30 2024  
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