		of Rhode Islar he Secretary o		Fee: \$50.00
	Division	Of Business Serv	vices	
	148	W. River Street		
	Provide	ence RI 02904-26	515	
1636	(4	401) 222-3040		
Limited Liability C Annual Report Filing Period: Februar				
refusing to file its ann	.I.G.L. 7-16-66(d), each lin nual report within thirty (30 (b&c)) is subject to a pena	) days after the ti		У У
ANNUAL REPORT Y	EAR - ENTER THE CURRE	NT YEAR <b>2024</b>	: <u>2024</u>	
1. ID No. <u>001672</u>	2900			
2. Exact Name of th	ne Limited Liability Compa	any <u>MMGY Glo</u> l	oal, LLC	
3. State of Formatic	on			
State: <u>DE</u>				
	NA	AICS CODE		
-	AICS Code that best descri codes <u>here.</u> More informa			
<u>541810</u>				
Island	of the Character of the Br		Actually Condu	ucted in Rhode
ADVERTISING A	ND PUBLIC RELATION			
5. Principal Office A	Address			
No. and Street:	<u>7309 W 80TH ST</u>			
	<u>SUITE 400</u>			
City or Town:	OVERLAND PARK	State: <u>KS</u>	Zip: <u>66204</u>	Country: <u>USA</u>
6. Mailing Address of	of Limited Liability Compa	any and Name or	Title of Contact	Person:
Contact Name: Cor	ntact Title: 7309 W 80TH STREET			
No. and Street: 7	SUITE 400			

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

<u>CT CORPORATION SYSTEM</u> <u>450 VETERANS MEMORIAL PARKWAY, SUITE 7A EAST</u> <u>PROVIDENCE</u>, <u>RI 02914</u>

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

**Signed this 6 Day of June, 2024 at 11:42:36 AM 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 MAYA QUIJANO

Signature of Authorized Person

Form No. 632 Revised 09/07

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