RI SOS Filing Number: 202457491170 Date: 6/28/2024 12:37:00 PM



## State of Rhode Island

## **Department of State - Business Services Division**

Annual Report for the year: Limited Liability Company

2024

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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1. Entity ID Number	2. Exact name of the Limited Liability Company				
001732990	Grant your Way, LLC				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
813219	Brewtycur Way, LLC provides growt writing, groat research  4 non-profit consulting Services.				
5. State of Formation	1 A constitution Consides.				
RI	1 non-profite const	THE SELVICE S			
6. Principal Office Address		City	State	Zip	
49 ERIE ST		Providence	KI	02908	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Contact Title					
Shelley 1.	Peterson President / CEO				
Street Address 49 ERIE ST		President / CE City Providence	State R1	Zip 02908	
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			Date	1	
Shelky T. Peterson			6/28/24		
Signature of Authorized Person					

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JUN 28 2024 BY\_NZPF8

MAIL TO:

**Division of Business Services** 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov