State of Rhode Island	No Fee
Office of the Secretary of State Division Of Business Services	
148 W. River Street	
Providence RI 02904-2615 (401) 222-3040	
Domestic Limited Liability Company Annual Report - Amended Filing Period: February 1 - May 1	
In accordance with R.I.G.L. 7-1.2-1501(e), 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.	
This form is only to be used to amend the current annual report on file with this office.	
ANNUAL REPORT YEAR: 2024	
1. ID No. <u>000861767</u>	
2. Exact Name of the Limited Liability Company Carbon Advertising, 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>541810</u>	
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island	
ADVERTISING AGENCY	
5. Principal Office Address	
No. and Street: <u>10 DORRANCE STREET</u> SUITE 700	
City or Town: <u>PROVIDENCE</u> State: <u>RI</u> Zip: <u>02903</u> Country: <u>US</u>	<u>A</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:	
Contact Name: <u>ALANA RILEY</u> Contact Title: No. and Street: <u>10 DORRANCE STREET</u> SUITE 700	
City or Town: PROVIDENCE State: RI Zip: 02903 Country: U	<u>SA</u>

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

ALANA N. RILEY 180 WATERMAN AVENUE, APT. 318 NORTH PROVIDENCE, RI 02911

Signed this 27 Day of July, 2024 at 10:04:33 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>ALANA N. RILEY</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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State of Rhode Island Department of State | Office of the Secretary of State Gregg M. Amore, Secretary of State

I, GREGG M. AMORE, Secretary of State of the State of Rhode Island,

hereby certify that this document, duly executed in accordance with the provisions

of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this

office on this day:

July 27, 2024 10:04 PM

Treng M. Course

Gregg M. Amore Secretary of State

