RI SOS Filing Number: 202459065360 Date: 8/26/2024 2:15:00 PM



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

Annual Report for the year:

2024

2024 AUG 26 PM 2: 1

**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	2. Exact name of the Limited Liability Company				
•					
000122995	Humanetrics LLC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
812990	To engage in the busine	in the business of human resource consulting and business			
5. State of Formation	speaking				
RI					
6. Principal Office Address		City	State	Zip	
40 Chevas Rd		Avon	СТ	06001	
7. Mailing Address of Limited Lia	ability Company and Name or Title	of Contact Person	• •		
Contact Name John Forte		Contact Title President			
Street Address, 40 Chevas Rd		City	State CT	<sup>Zip</sup> 06001	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.					
	declare and affirm that I have ex- ments contained herein are true	- · · · · · · · · · · · · · · · · · · ·	luding any accompany	ing schedules and	
Name of Authorized Person			Date	Date	
John Forte			August 18	August 18, 2024	
Signature of Authorized Person					

MAIL TO:

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

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

ised. 12/2023