RI SOS Filing Number: 202567259460 Date: 3/14/2025 4:00:00 PM

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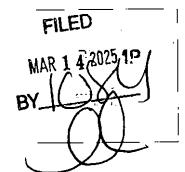
State of Rhode Island Department of State - Business Services Division

Annual Report for the year: 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 001726391	2. Exact name of the Limited Liability Company Metamorphosis Management Group LLC				
3. NAICS Code 541618	BUSINESS SERVIC	4. Brief description of the character of business conducted in Rhode Island BUSINESS SERVICES, MANAGEMENT CONSULTING, EXECUTIVE COACHING, TRAINING & DEVELOPMENT			
5. State of Formation NY	OOAOIMIO, III				
6. Principal Office Address 5 Rhode Island Ave		City Providence	State RI	Zip 02906	
7. Mailing Address of Limite	ed Liability Company and Name or	Title of Contact Person	•		
Contact Name Charles E Smith		Contact Tille Member			
Street Address 5 Rhode Island Ave		City Providence	State RI	^{Zip} 02906	
8. The Resident Agent info	rmation currently of record with the	RI Department of State is accura	ate. Changes require	e filing Form 642.	
9. Under penalty of perju	ry, I declare and affirm that I hav	e examined this report, includi			
statements, and that all statements contained herein are true and correct. Name of Authorized Person Charles E. Smith			Date 3/10/2025		
Signature of Authorized Pe	T. Sul				

MAIL TO:

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

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