	State of Rh Office of the Se	ode Island cretary of S	State	Fee: \$50.00
	Division Of Bu	isiness Servic iver Street	es	
	Providence R			
1636		1 02904-2013 22-3040		
		22-30-0		
Limited Liabilit Annual Report Filing Period: Fel	É É É			
refusing to file its	ith R.I.G.L. 7-16-66(d), each limited li s annual report within thirty (30) days 6-66(b&c)) is subject to a penalty fee	after the time		,
ANNUAL REPO	RT YEAR - ENTER THE <u>CURRENT</u> FIL	ING YEAR 2	023 : <u>2023</u>	
1. ID No. <u>00</u>	1749870			
2. Exact Name	of the Limited Liability Company $\underline{\mathrm{Lc}}$	ocal Creative I	LC	
3. State of Form	nation			
State: <u>RI</u>				
	ARTICL	E III		
-	jit NAICS Code that best describes th st of codes <u>here.</u> More information or			
<u>541800</u>				
4. Brief Descrip Island	ntion of the Character of the Busines	s Which is A	ctually Condu	cted in Rhode
MARKETING	STRATEGY, WEBSITE DESIGN,	AND CONS	ULTING.	
5. Principal Off	ice Address			
5. Principal Off No. and Street:	ice Address <u>181 BELLEVUE AVENUE</u> <u># 242</u>			
•	181 BELLEVUE AVENUE	State: <u>RI</u>	Zip: <u>02840</u>	Country: <u>USA</u>
No. and Street: City or Town:	<u>181 BELLEVUE AVENUE</u> <u># 242</u>			
No. and Street: City or Town: 6. Mailing Addre	<u>181 BELLEVUE AVENUE # 242 NEWPORT</u>	d Name or Tit		

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

REGISTERED AGENTS INC. 47 WOOD AVE. STE 2 BARRINGTON , RI 02806

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

Signed this 27 Day of April, 2023 at 5:33:52 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 GALEN VAUGHTERS

Signature of Authorized Person

Form No. 632 Revised 09/07

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