



State of New Hampshire

Department of State

2015 ANNUAL REPORT

Filed

Date Filed: 3/28/2015

Effective Date: 3/28/2015

Business ID: 546819

William M. Gardner

Secretary of State

BUSINESS NAME: **MORE EFFECTIVE CONSULTING LLC**

BUSINESS TYPE: **Domestic Limited Liability Company**

BUSINESS ID: **546819**

CITIZENSHIP: **Domestic**

STATE OF FORMATION: **New Hampshire**

CURRENT PRINCIPAL OFFICE ADDRESS

**7 Old Boston Road
Mont Vernon, NH, 03057, USA**

CURRENT MAILING ADDRESS

**7 Old Boston Road
Mont Vernon, NH, 03057, USA**

REGISTERED AGENT AND OFFICE

REGISTERED AGENT: **Morrisette, Matthew**

REGISTERED AGENT OFFICE ADDRESS: **10 Chestnut Cr Mont Vernon, NH, 03057, USA**

PRINCIPAL PURPOSE(S)

NAICS CODE

**OTHER / CONDUCT CONSULTING/TRAINING SERVICES
TO MFG & HEALTHCARE BUSINESSES**

NAICS SUB CODE

MANAGER / MEMBER INFORMATION

NAME

BUSINESS ADDRESS

TITLE

Matthew Morrisette

7 Old New Boston Road, Mont Vernon, NH, 03057, USA

Member

I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief.

Matthew Morrisette

Member

SIGNATURE

TITLE



State of New Hampshire

Department of State

2015 ANNUAL REPORT



ONLINE ANNUAL REPORT CONFIRMATION RECEIPT

Business Name: **MORE EFFECTIVE CONSULTING LLC**
Type of Request: **Annual Report**

Payment Received: **\$102.00**
Request Date/Time: **3/28/2015 11:19:00 PM**

PAYMENT RECEIPT

Payment Type: **Credit Card**
Payment #: **#####7866**
Billing Amount: **\$102.00**

Payment Transaction #: **9323**
Authorization: **06215D**
Billing Date / Time: **3/28/2015 11:19:00 PM**

Filing Fee: **\$100.00**
Electronic Filing Fee: **\$2.00**
Total Fees: **\$102.00**