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Department of State - Business Services Division

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Annual Report for the year: 2021
Limited Liability Company

2021 JUN 18 A 11: 47

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

-> Penalty: Additional \$25.00 fee if form is not filed by December 1.

C. E. C. ISN.	1.0						
1. Entity ID Number	2. Exact name of the Limited Liability Company						
001682270	NATURAL BEAUTY GROUP LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
446120	SALE OF BEAUTY PRODUCTS						
5. State of Formation	1						
RHODE ISLAND							
6. Principal Office Address	<u> </u>		City	State	Zip		
75 JOHN STREET			PAWTUCKET	RI	02861		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Contact Name YANIV ZINGER			Contact Title MEMBER				
Street Address 75 JOHN STREET			City PAWTUCKET	State RI	^{Zip} 02861		
8. List ALL managers (names ar	nd addresses) of	the Limited Liabi	lity Company, IF APPLICABLE -	DO NOT LIST ME	MBERS		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
Manager Name			Manager Name				
Street Address			Street Address				
City	State	Zip	City	State	Zip		
		**	Ch	eck the box to ind	icate an attachment		
9. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.							
Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.							
Name of Authorized Person	Date						
MICHAEL HAKANI				06/1	7/21		
Signature of Authorized Paren							

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

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BI - 1 1 5 5 FORM 632 - Revised: 08/2020