

Annual Report for the year: 2021 Limited Liability Company

→ Filing period: September 1 - November 1

→ Filing Fee: \$50.00

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

FILED	
SEP 2 2021	

Entity ID Number	2. Exact name of the Limited Liability Company					
156803	Kari Tieger LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
611110	Music Education					
5. State of Formation	Recordings for Sale					
DT RECOVERY						
K+			Loan	State	Zip	
6. Principal Office Address 82 President Avenue			Riverside	RI	02915	
7. Mailing Address of Limited Lia	bility Company	and Name or Title	of Contact Person			
Contact Name Tieger		Contact Title Owner and President				
Street Address President Avenue			Riverside	State 1	02915	
8. List ALL managers (names ar	nd addresses) o	f the Limited Liab	ility Company, IF APPLICABLE	DO NOT LIST M	EMBERS	
Manager Name			Manager Name			
Street Address		Street Address				
City	State	Zip	City	State	Zip	
Manager Name			Manager Name			
Street Address		Street Address				
City	State	Zìp	City	State	Zip	
		<u> </u>	C	heck the box to in	dicate an attachment	
9. The Resident Agent information	on currently of re	ecord with the RI	Department of State is accurate	Changes require	filing Form 642.	
Under penalty of perjury, I dec statements, and that all staten	lare and affirm	that I have exam	mined this report, including an			
Name of Authorized Person Date						
Kari Treger AKA Karen Brennan 8/30/21						
Signature of Authorized Person						
(Xano) lelen						

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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