(33)	State of Rhode Islan
	State of Rhode Islan Department of

Department of State - Business Services Division

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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.

4.5 (2) (5.4)	10.5					
1. Entity ID Number	2. Exact name of the Limited Liability Company					
1658009	DNW HOLDINGS, LLC.					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
711320	INSTRUCTION OF GYMNASTICS / TUMBLING (SPORT)					
5. State of Formation]					
RHODE ISLAND						
6. Principal Office Address			City	State	Zip	
12 WATERMAN AVE			NORTH PROVIDENCE	RI	02911	
7. Mailing Address of Limited Lia	bility Compan	y and Name or Title	of Contact Person	•	•	
Contact Name TOM O. MILLER			Contact Title OWNER/PRES.			
Street Address 12 WATERMAN AVE			City NORTH PROVIDENCE	State RI	^{Zip} 02911	
8. List ALL managers (names and addresses) of the Limited Liability Company, IF APPLICABLE - DO NOT LIST MEMBERS						
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zıp	City	State	Zip	
Manager Name			Manager Name			
Street Address			Street Address			
City	State	Zip	City	State	Zip	
	.		Che	ck the box to indi	cate 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		
TOM O. MILLER				10-08-2021		
Signature of Authorized Person Tom De Mindry						

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**

OCT 1 2 2021

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