		of Rhode Isla he Secretary		Fee: \$50.00
	148	1 Of Business Se 3 W. River Stree ence RI 02904-2	t	
HOPE	(4	401) 222-3040		
Limited Liability Compared Annual Report Filing Period: February 1 - May				
In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.				
ANNUAL REPORT YEAR: 2021				
1. ID No. <u>001704204</u>				
2. Exact Name of the Limited Liability Company <u>Cutie Curls LLC</u>				
3. State of Formation				
State: <u>RI</u>				
ARTICLE III				
Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online.				
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island				
<u>I OWN MY OWN BUSINESS AND SELL ALL HAND MADE ITEMS BY MYSELF AND OTHER ARTISTS.</u>				
5. Principal Office Address				
	HLAND AVE E COMPTON	State: <u>RI</u>	Zip: <u>02837</u>	Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:				
	<u>ON</u> Contact Title: HLAND AVE			
	COMPTON	State: <u>RI</u>	Zip: <u>02837</u>	Country: <u>USA</u>
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11				
INDIA KENYON 3952 MAIN ROAD TIVERTON , RI 02878				
8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).				

Signed this 28 Day of January, 2022 at 4:03:29 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 <u>INDIA KENYON</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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