



**State of Rhode Island  
Office of the Secretary of State**

**Fee: \$50.00**

Division Of Business Services  
148 W. River Street  
Providence RI 02904-2615  
(401) 222-3040

**Limited Liability Company  
Annual Report**

*Filing Period: February 1 - May 1*

*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:** 2022

**1. ID No.** 001724753

**2. Exact Name of the Limited Liability Company** ONE IF LLC

**3. State of Formation**

State: DE

**ARTICLE III**

Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes [here](#). More information on [NAICS](#) can be found online.

487210

**4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island**

BOAT CHARTERING, SCENIC AND SIGHTSEEING TRANSPORTATION AND RELATED SERVICES

**5. Principal Office Address**

No. and Street: 3500 S DUPONT HIGHWAY

City or Town: DOVER

State: DE

Zip: 19901

Country: USA

**6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:**

Contact Name: LAUREN WALSH Contact Title: OWNER

No. and Street: 532 LANDGROVE ROAD

ONE IF LLC

City or Town: LONDONDERRY

State: VT

Zip: 05148

Country: USA

**7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER  
Changes Require Filing of Form 642 - R.I.G.L. 7-16-11**

KATHLEEN GINEO 28 HILLSIDE AVENUE NEWPORT , RI 02840

**8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).**

**Signed this 13 Day of April, 2022 at 1:40:41 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 LAUREN G. WALSH  
Signature of Authorized Person

Form No. 632  
Revised 09/07

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