|  |                                  | of Rhode Island<br>Ne Secretary |                   | Fee: \$50.00                 |
|--|----------------------------------|---------------------------------|-------------------|------------------------------|
|  | Division                         | Of Business Se                  | rvices            |                              |
| 148 W. River Street  |                                  |                                 |                   |                              |
| Providence RI 02904-2615<br>(401) 222-3040   |                                  |                                 |                   |                              |
| HOPE   | (4                               | 01) 222-3040                    |                   |                              |
| Limited Liability Company  |                                  |                                 |                   |                              |
| Annual Report<br>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. <u>000508089</u>   |                                  |                                 |                   |                              |
| 2. Exact Name of the Limited Liability Company Rounds Holdings, LLC  |                                  |                                 |                   |                              |
| 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 here. More information on NAICS can be found online.   |                                  |                                 |                   |                              |
| <u>508089</u>  |                                  |                                 |                   |                              |
| 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island  |                                  |                                 |                   |                              |
|  |                                  |                                 |                   |                              |
| PROPERTY MAN   | AGEMENT                          |                                 |                   |                              |
| 5 Bringing Office A  | ddroop                           |                                 |                   |                              |
| 5. Principal Office A  | ladress                          |                                 |                   |                              |
| No. and Street:  | 40 STARLINE WAY                  |                                 |                   |                              |
| City or Town:  | <u>UNIT 1</u><br>CRANSTON        | State: RI                       | Zip: <u>02921</u> | Country: <u>USA</u>          |
|  |                                  | 5tate. <u>Ki</u>                | Zip. <u>02721</u> | <u>country</u> . <u>cont</u> |
| 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:   |                                  |                                 |                   |                              |
| Contact Name: <u>NIN</u>   | IA LERMONTOV Contact Title       | :                               |                   |                              |
| No. and Street:  | 40 STARLINE WAY                  |                                 |                   |                              |
| City or Town:  | <u>UNIT 1</u><br><u>CRANSTON</u> | State: <u>RI</u>                | Zip: <u>02921</u> | Country: <u>USA</u>          |
| 7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER<br>Changes Require Filing of Form 642 - R.I.G.L. 7-16-11  |                                  |                                 |                   |                              |
| NINA LERMONTOV 5 WATER VALLEY ROAD HOPE, RI 02831  |                                  |                                 |                   |                              |
| 8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).  |                                  |                                 |                   |                              |

## Signed this 11 Day of July, 2022 at 11:14:36 AM 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>N.LERMONTOV</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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