RI SOS Filing Number: 202224298890 Date: 10/25/2022 1:07:00 PM



State of Rhode Island

## **Department of State - Business Services Division**

STAMP

Annual Report for the year: \_\_\_\_\_2023 **Limited Liability Company** 

→ Filing period: February 1 - May 1

→ Filing Fee: \$50 00

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→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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	1011 001 20 1 1 0 1				
Entity ID Number	2. Exact name of the Limited Liability Company				
001706045	EMPOWER RILLC	EMPOWER A! LLC			
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
812990	WEUNESS	WEUNESS			
5. State of Formation					
RI					
6. Principal Office Address	C	ity	State	Zip	
37 N FAIR ST		VARWICK	RI	02888	
7. Mailing Address of Limite	d Liability Company and Name or Title of	Contact Person			
Contact Name LAURA CTOODWIN		Contact Title  OWNER			
Street Address 37 NFAIR ST		NARWICK	State R	Zip 02888	
8. The Resident Agent infor	mation currently of record with the RI Dep	artment of State is accura	ate. Changes requi	re filing Form 642	
Under penalty of perjury, statements, and that all s	declare and affirm that I have examine atements contained herein are true and	d this report, including I correct.	any accompanyir	ng schedules and	
Name of Authorized Person			Date		
LAVAN GOODWIN			10/24/2022		
Signature of Authorized Per					
I-Nt	-				
				-	

MAIL TO:

**Division of Business Services** 

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

Phone: (401) 222-3040 Website: www.sos.ri.gov OCT 2 5 2022