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State of Rhode Island

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

STAMP

Annual Report for the year: 2023 **Limited Liability Company** 

FILED SECRETARY OF STATE . .

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

JAN 1 9 2023

1. Entity ID Number	2. Exact name of the Limited Liability Company			0		
796019	K.IF DESIGN. L.L.C.					
3. NAICS Code	4. Brief description of the	4. Brief description of the character of business conducted in Rhode Island				
531120		management and ownership of commercial and residential real estate				
5. State of Formation	management and ow					
Rhode Island						
6. Principal Office Address		City	State	Zip		
38 Anchorage Court		Bristol	RI	02809-0000		
7. Mailing Address of Limited	d Liability Company and Name	or Title of Contact Person				
Contact Name Kendra J. Ferreira		Contact Title Manager				
Street Address 38 Anchorage Court		City Bristol	State <b>RI</b>	Zip 02809-0000		
8. The Resident Agent inforr	nation currently of record with the	he RI Department of State is accurat	e. Changes requ	ire filing Form 642.		
Under penalty of perjury, I statements, and that all st	declare and affirm that I have atements contained herein ar	e examined this report, including a re true and correct.	ny accompanyi	ng schedules and		
Name of Authorized Person			Date			
Kendra J. Ferreira		Manager	1/	1/04/2023		
Signature of Authorized Per	son		ılı	5/2003		
Kendra O	Leviena		1   1	219mg7		

MAIL TO:

Division of Business Services

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

Phone: (401) 222-3040 Website: www.sos.ri.gov