| State of Rhode Island | Fee: \$50.00 |
|---|---------------|
| Office of the Secretary of State | |
| Division Of Business Services | |
| 148 W. River Street Providence RI 02904-2615 | |
| 1636 (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: 2023 | |
| 1. ID No. <u>001719023</u> | |
| 2. Exact Name of the Limited Liability Company Lucky Moon Tattoo LLC | |
| 3. State of Formation | |
| State: <u>RI</u> | |
| ARTICLE III | |
| Enter the civit digit NALCO Code that best describes the primery business conducted by the entity | |
| 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. | |
| 222000 | |
| <u>238990</u> | |
| 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island | |
| | |
| PROFESSIONAL TATTOOING | |
| 5. Principal Office Address | |
| | |
| No. and Street: 20 CEDAR SWAMP ROAD City or Town: SMITHFIELD State: RI Zip: 02917 Country | y: <u>USA</u> |
| 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person: | |
| Contact Name: JAMES BESHAW Contact Title: OWNER | |
| No. and Street: <u>16 CEDAR SWAMP RD</u> | |
| City or Town: <u>SMITHFIELD</u> State: <u>RI</u> Zip: <u>02917</u> Count | ry: <u>US</u> |
| 7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11 | |
| | |
| IZAIAH YELLE 20 CEDAR SWAMP ROAD SMITHFIELD , RI 02917 | |

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

Signed this 25 Day of January, 2023 at 4:30:06 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 JAMES BESHAW

Signature of Authorized Person

Form No. 632 Revised 09/07

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