RI SOS Filing Number: 202326865350 Date: 1/27/2023 2:19:00 PM



State of Rhode Island

Department of State - Business Services Division

R.I. DEPT. OF STATE -----SUS SYCS DIV

2023 JAN 27 PM 2: 17

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

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

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|--|---|------------------------|-----------|-----------|
| 1. Entity ID Number | 2. Exact name of the Limited Liability Company | | | |
| 1695975 | PANS LAWS KA TRAINING LLC | | | |
| 3. NAICS Code | 4. Brief description of the character of business conducted in Rhode Island | | | |
| 812910 | Dag Training services | | | |
| 5. State of Formation | , | | | |
| RI | | | | |
| 6. Principal Office Address | | Câty | State | Ζέφ |
| 14 THOMPSON TRAIL | | WYOMING | RI | 02898 |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | | |
| CONTACT Name CAITINN LAWING | | Contact Title OWNER | | |
| Street Address 14 THOMPSON TRL | | City WYOM I N(TI | State Q \ | 71p 02898 |
| 8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642. | | | | |
| Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct. | | | | |
| Name of Authorized Person | | | Date | |
| CAITLYN LAWING | | | 1/2 | 5/2023 |
| Signature of Authorized Person | | | | |
| Cattly Hawing | | | | |

MAIL TO:

Division of Business Services

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

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

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BY \$\frac{18982}{}\$