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State of Rhode Island Department of State - Business Services Division	
Annual Report for the year: Limited Liability Company	RECEIVED R.I. DEPT. OF STAFF 000 SYCS DW
 → Filing period. February 1 - May 1 → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by May 31. 	1073 JAN 30 P 3: 20

2 Exact name of the Limited Liability Company mperial 000134151 4 600KIV 3. NAICS Code 4. Brief description of the character of business conducted in Rhode Island 5. State of Formation 6. Principal Office Address City Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Name State 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. of Authorized Person of Authorized Person

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615

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