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Department of State - Business Services Division

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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.

1. Entity ID Number	2. Exact name of the Limited List	bility Company					
001682704	DOGSTAR	BLUE LL	· 				
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
711211	Boat - Pleasure Craft						
5. State of Formation			_				
6. Principal Office Address		City	State	Zip			
18 OHMPIA	AVE	Thermon	RI	02878			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person							
Robert Andi	erson	Contact Title YNANAGER					
Street Address CRY BV D	OKO ROAD	Rehaboth	State 7	2182769			
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	B Ander	Son	Date	8/23			
Signature of Authorized Person	9h	<u>ب</u>					

FEB 28 2023 BY WPT B

MAIL TO:

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

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