F	
	hode Island Fee: \$50.00 ecretary of State
	usiness Services
	River Street
	RI 02904-2615
	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>001704099</u>	
2. Exact Name of the Limited Liability Company Jessie Dwiggins: Yoga & Wellness, LLC	
3. State of Formation	
State: <u>RI</u>	
ARTICL	LE III
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.	
<u>812990</u>	
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island	
YOGA INSTRUCTION, WELLNESS COACH	
5. Principal Office Address	
No. and Street: <u>144 WHIPPLE ROAD</u>	
City or Town: <u>SMITHFIELD</u>	State: <u>RI</u> Zip: <u>02917</u> Country: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:	
Contact Name: Contact Title:	
No. and Street: <u>144 WHIPPLE ROAD</u>	
City or Town: <u>SMITHFIELD</u>	State: <u>RI</u> Zip: <u>02917</u> Country: <u>USA</u>
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11	
BERNARD A. POIRIER, CPA 469 CENTERVILLE ROAD SUITE 203 WARWICK , RI 02886	
DERIVATE ALT GINER, GLA 400 GENTERVILLE ROAD SOTTE 200 WARMOR, RI 02000	

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

Signed this 2 Day of March, 2023 at 12:47:40 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 JESSIE DWIGGINS

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2023 State of Rhode Island All Rights Reserved