

State of Rhode Island Department of State - Business Services Division R.I. DEPTLOF STATE SUS SYDS DIV

Annual Report for the year: $\underline{^{2022}}$

2023 MAR - 6 PM 4: 20

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 Liability Company				
001733366	CutieCozy LLC	CutieCozy LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
214120	Selling fitted crib sheets to consur	Selling fitted crib sheets to consumers.			
5. State of Formation					
Rhode Island					
6. Principal Office Address		City	State	Zip	
555 N Main St #1110		Providence	RI	02904	
	d Liability Company and Name or Title o				
Contact Name Ayisha Lee		Contact Title LLC Member			
Street Address 555 N Main St #1110		City Providence	State RI	^{Zip} 02904	
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 statements, and that all st	declare and affirm that I have examin atements contained herein are true ar	ned this report, including nd correct.	ng any accompanying	g schedules and	
Name of Authorized Person			Date		
Ayisha Lee			3/4/23		
Signature of Authorized Pers	ion				
Ayisha Lee					

FILED

MAR 06 2023

BY XFQEA 4:210t

MAIL TO:

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

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