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State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: 2023 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 Lia	ability Company	 -			
001696430	No WORRIES, LLC					
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island					
531110	Residential Rental PROPERTY					
5. State of Formation		•				
thode ISLAND						
Principal Office Address	· · · · · · · · · · · · · · · · · · ·	City	State	Zip		
166 COUNCIL	ROCK ROAD	CRANSTON	RI	02921		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name Contact Title DWNER						
	ROCK ROAD	City CRANSTON		Zip 2921		
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			
ROBERT A. MILLERICK			3/7/23			
Signature of Authorized Person						
	<u> </u>					

MAIL TO:

Division of Business Services

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

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