

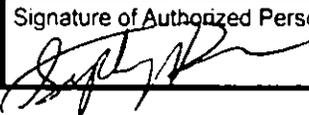


State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2022
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.

STAMP
 RECEIVED
 R.I. DEPT. OF STATE FOR
 BUS SVCS SECRETARY OF STATE
 USE ONLY
 2023 APR -6 P 3:16

| | | | |
|---|---|---------------------|--------------|
| 1. Entity ID Number 001731000 | 2. Exact name of the Limited Liability Company SOPH LLC | | |
| 3. NAICS Code 531000 | 4. Brief description of the character of business conducted in Rhode Island REAL STATE | | |
| 5. State of Formation RHODE ISLAD | | | |
| 6. Principal Office Address 50 HILL TOP DR | City JOHNSTON | State RI | Zip 02919 |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person | | | |
| Contact Name SOPHEAP PEN | | Contact Title OWNER | |
| Street Address 50 HILL TOP DR | City JOHNSTON | State RI | Zip 02919 |
| 8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642. | | | |
| <i>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.</i> | | | |
| Name of Authorized Person SOPHEAP PEN | | Date 04/03/2023 | |
| Signature of Authorized Person  | | | |

FILED
 APR 06 2023
 BY 4BX SD
 A.A. 3:17pm

MAIL TO:
 Division of Business Services
 148 W. River Street, Providence, Rhode Island 02904-2615
 Phone: (401) 222-3040
 Website: www.sos.ri.gov