	State of Rhode		Fee: \$50.00
<b>₩</b>	Office of the Secreta Division Of Busines	-	
	148 W. River S		
1636	Providence RI 029		
1636 (401) 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>001747856</u>			
2. Exact Name of the Limited Liability Company <u>OW Insurance Solutions, LLC</u>			
3. State of Formation			
State: <u>WA</u>			
ARTICLE 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>524210</u>			
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island			
INSURANCE AGENTS, BROKERS, & RELATED ACTIVITIES.			
5. Principal Office Address			
No. and Street:	<u>1415 VANTAGE PARK DR STE 700</u> 1415 VANTAGE PARK DR STE 700		
City or Town:	CHARLOTTE	State: <u>NC</u> Zip: <u>28203</u> C	ountry: <u>USA</u>
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:			
	TERRI EDWARDS Contact Title: 1415 VANTAGE PARK DR STE 700		
City or Town:	1415 VANTAGE PARK DR STE 700 1415 VANTAGE PARK DR STE 700 CHARLOTTE	State: <u>NC</u> Zip: <u>28203</u> C	ountry: USA
		<b> </b>	<u> </u>

## 7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

INCORP SERVICES, INC. 222 JEFFERSON BOULEVARD, SUITE 200 WARWICK , RI 02888

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

**Signed this 13 Day of April, 2023 at 1:55:26 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 TERRIEDWARDS

Signature of Authorized Person

Form No. 632 Revised 09/07

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