		e of Rhode Isla the Secretary		Fee: \$50.00
Division Of Business Services				
148 W. River Street Providence RI 02904-2615				
1636		(401) 222-3040	2015	
Limited Liability Annual Report Filing Period: Febru				
refusing to file its a	R.I.G.L. 7-16-66(d), each i nnual report within thirty (3 6(b&c)) is subject to a peri	30) days after the	time prescribed	by
ANNUAL REPORT	YEAR - ENTER THE <u>CURR</u>	ENT FILING YEA	R 2023 : <u>2023</u>	
1. ID No. <u>0007</u>	96647			
2. Exact Name of	the Limited Liability Com	pany <u>Magnolia H</u>	li-Fi, LLC	
3. State of Forma	tion			
State: <u>WA</u>				
		ARTICLE III		
-	NAICS Code that best desc of codes <u>here.</u> More inform			
<u>449210</u>				
4. Brief Descriptio Island	n of the Character of the	Business Which	is Actually Cond	ducted in Rhode
RETAIL ELECTR	RONICS			
5. Principal Office	Address			
No. and Street:	<u>7601 PENN AVE S</u>			
City or Town:	<u>RICHFIELD</u>	State: <u>MN</u>	Zip: <u>55423</u>	Country: <u>USA</u>
6. Mailing Address	s of Limited Liability Com	pany and Name c	or Title of Contac	ct Person:
Contact Name: C				
No. and Street: City or Town:	<u>7601 PENN AVE S</u> <u>RICHFIELD</u>	State: <u>MN</u>	Zip: <u>55423</u>	Country: <u>USA</u>
	NT IN RHODE ISLAND - DO e Filing of Form 642 - R.I.			
	-			
	ON SYSTEM 450 VETERA	ANS MEMORIAL I	-ARKWAY, SUIT	E /A EAST

PROVIDENCE, RI 02914

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

Signed this 27 Day of April, 2023 at 6:49:53 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 <u>ADAM DEIS</u>

Signature of Authorized Person

Form No. 632 Revised 09/07

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