RI SOS Filing Number: 202335421860 Date: 5/9/2023 4:00:00 PM



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.



1. Entity ID Number	2. Exact name of the Limited Liability Company			
000119634	Tigger's Restaurant, LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
722513	Restaurant			
5. State of Formation				
Rhode Island				
6. Principal Office Address		City	State	Zip
53 Woodside Avenue		Pawtucket	RI	02861
7. Mailing Address of Limited Lia	bility Company and Name or			**
Contact Name Jessica Cordeiro		Contact Title Member		
Street Address 53 Woodside Avenue		^{City} Pawtucket	State RI	^{Zip} 02861
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	
Jessica Cordeiro			4/4/23	
Signature of Authorized Person			•	

Division of Business Services

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

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