State of Rhode Island Fee: \$5 Office of the Secretary of State	0.00
Division Of Business Services	
148 W. River Street	
Providence RI 02904-2615	
<b>1636</b> (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 - ENTER THE <u>CURRENT</u> FILING YEAR <b>2023</b> : <u>2023</u>	
1. ID No. <u>001734423</u>	
2. Exact Name of the Limited Liability Company <u>AONE CREATIVES LLC</u>	
3. State of Formation	
State: <u>RI</u>	
NAICS CODE	
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>541430</u>	
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island	
THE TYPE OF BUSINESS DONE IN RHODE ISLAND IS MAINLY GRAPHIC PROMOTIONAL	
MATERIALS, THIS INCLUDES BUT IS NOT LIMITED TO (EVENT FLYERS, CLUB	
FLYERS,	
PARTY PROMOTIONAL ITEMS, MOTION GRAPHICS, APPAREL DESIGN FOR	
PROMOTION,	
SOCIAL MEDIA GRAPHIC DIRECTION FOR EVENTS AND BRANDS.	
5. Principal Office Address	
No. and Street: <u>144 OAK LANDING DRIVE SOUTH</u>	
REAR   City or Town: DOUGLASVILLE   State: GA   Zip: 30134   Country: US	

## 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: JESSI PERALTA Contact Title:

No. and Street: 144 OAK LANDING DRIVE SOUTH

City or Town: DOUGLASVILLE

State: GA Zip: 30134 Country: USA

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

LEGALINC CORPORATE SERVICES INC. 222 JEFFERSON BLVD. 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 5 Day of June, 2023 at 11:06:18 AM 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 JESSI PERALTA

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2023 State of Rhode Island All Rights Reserved