F.4.	State oRLnSQSsia Filling Number: 202339084700	Date: 7/3/2023 4:00:00 PM		
العليه	State of State - Business Services Division Date: 7/3/2023 4:00:00 PM Department of State - Business Services Division			

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

	< STAMP
Annual Report for the year: $\frac{2023}{2000}$	JUL 03 2023 5/6)
imited Liability Company	
→ Filing period: February 1 - May 1	$S(\omega)$
→ Filing Fee: \$50.00	•

1. Entity (D Number 505659	2. Exact name of the Limited Liability Company Rhode Island Air, LLC				
3. NAICS Code 485999	4. Brief description of the character of business conducted in Rhode Island To own and operate an aircraft.				
5. State of Formation Rhode Island					
6. Principal Office Address		City	State	Zip	
333 Central Park West #74		New York	NY	10025	
7. Mailing Address of Limite	d Liability Company and Na	me or Title of Contact Person		, 	
Contact Name Michael Gilso	on, M.D.	Contact Title			
Street Address 333 Central I	Park West #74	City New York	State NY	Zip 10025	
8. The Resident Agent infor	mation currently of record w	ith the RI Department of State is accu	urate. Changes require	e filing Form 642.	
	I declare and affirm that I i tatements contained herei	nave examined this report, includir n are true and correct.	ng any accompanyin	g schedules and	
Name of Authorized Person	1		Date		
Michael Gilson, M.D.	α		Ju	~ 27 ,2023	
Signature of Authorized Per	rson				

MAIL TO:

Division of Business Services

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

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