



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.

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 R.I. DEPT. OF STATE  
 BUS SVCS DIV  
 2023 JUN -5 AM 10: 51

1. Entity ID Number 001686278		2. Exact name of the Limited Liability Company Closson Cookies LLC	
3. NAICS Code 424410		4. Brief description of the character of business conducted in Rhode Island Wholesale cookies sales and delivery direct to stores.	
5. State of Formation RI			
6. Principal Office Address 58 Melody Hill CC Road		City Chepachet	State RI
Zip 02814			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Jeffrey Closson		Contact Title Resident Agent	
Street Address 58 Melody Hill CC Road		City Chepachet	State RI
Zip 02814			
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 602			
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 Jeffrey Closson		Date 05/30/2023	
Signature of Authorized Person <i>Jeffrey Closson</i>			

**FILED**

SEP 08 2023 2:18pm

BY LKS / 2753

**MAIL TO:**

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