RI SOS Filing Number: 202343142430 Date: 12/1/2023 10:47:00 AM



State of Rhode Island **Department of State - Business Services Division**

Annual Report for the year: **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.

RECEIVED R.I. DEPT. OF STATE: BUS SYCS BLY				
2023 DEC -1 A 10:113				

1. Entity ID Number	2. Exact name of the Limited Liability Company				
001707866	moroccan hair salon llc				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
812112					
5. State of Formation	Salon				
RI					
6. Principal Office Address	·	City	State	Zip	
99 Poyle Ave	2 Providuce	Providua	RJ	02906	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name Contact Title					
C'AUde	ClAude Medina Owner				
Street Address 99 Do	ale Aue	city Providence	State	zip 02906	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642					
9. 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 (ClAude Medi	na	Date 12/1	/2023	
Signature of Authorized Person					

FILED

DEC 01 2023 BYMPL BXYQS

MAIL TO:

Division of Business Services

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

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