State of Rhode Island Fee: \$50.00 Office of the Secretary of State Office of the Secretary of State
Division Of Business Services
148 W. River Street
Providence RI 02904-2615
(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 CURRENT YEAR 2024: 2024
1. ID No. <u>001692798</u>
2. Exact Name of the Limited Liability Company <u>Transform KM LLC</u>
3. State of Formation
State: <u>DE</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>452112</u>
4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island
RETAIL
5. Principal Office Address
No. and Street: <u>5407 TRILLIUM BOULEVARD SUITE B120</u> SUITE B120
City or Town: HOFFMAN ESTATES State: IL Zip: 60192 Country: USA
6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:
Contact Name: <u>LUKE VALENTINO</u> Contact Title: No. and Street: <u>5407 TRILLIUM BOULEVARD SUITE B120</u> SUITE B120
City or Town: HOFFMAN ESTATES State: IL Zip: 60192Country: USA
7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

COGENCY GLOBAL INC. 222 JEFFERSON BOULEVARD 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 December, 2023 at 9:51:31 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 <u>LUKE VALENTINO</u> Signature of Authorized Person

Form No. 632 Revised 09/07

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