



State of Rhode Island
Department of State - Business Services Division

Annual Report for the year: 2023

Limited Liability Company

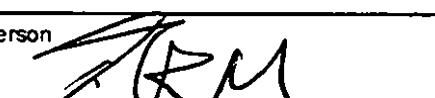
→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

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BUS SVCS DIV

2024 JAN 17 P 4:19

1. Entity ID Number 001675137		2. Exact name of the Limited Liability Company TM LLC	
3. NAICS Code 812112		4. Brief description of the character of business conducted in Rhode Island ESTHETICIAN SERVICES.	
5. State of Formation Rhode Island			
6. Principal Office Address 875 Oaklawn Avenue, Ste 203		City Cranston	State RI
		Zip 02920	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Timothy McGregor		Contact Title Sole Member	
Street Address 875 Oaklawn Ave, Ste 203		City Cranston	State RI
		Zip 02920	
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 Timothy McGregor		Date JAN 15/24	
Signature of Authorized Person 			

FILED 4:20

JAN 17 2024

BY V82F9
PS

MAIL TO:

Division of Business Services

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