

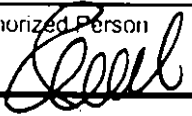


State of Rhode Island  
Department of State - Business Services Division

STAMP

Annual Report for the year: 2024  
Limited Liability Company

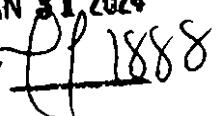
- Filing period: February 1 - May 1  
→ Filing Fee: \$50.00  
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

|   |  |   |                   |              |
|---|--|---|-------------------|--------------|
| 1. Entity ID Number<br>001701730  |  | 2. Exact name of the Limited Liability Company<br>LOWKEY LLC                                  |                   |              |
| 3. NAICS Code<br>722511   |  | 4. Brief description of the character of business conducted in Rhode Island<br>RESTAURANT/BAR |                   |              |
| 5. State of Formation<br>RI   |  |   |                   |              |
| 6. Principal Office Address<br>205 MAIN STREET  |  | City<br>EAST GREENWICH  | State<br>RI       | Zip<br>02818 |
| 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person   |  |   |                   |              |
| Contact Name<br>ZACHARY FLANDERS  |  | Contact Title<br>MEMBER   |                   |              |
| Street Address<br>205 MAIN STREET   |  | City<br>EAST GREENWICH  | State<br>RI       | Zip<br>02818 |
| 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<br>ZACHARY FLANDERS - MEMBER  |  |   | Date<br>1-27-2024 |              |
| Signature of Authorized Person<br>   |  |   |                   |              |

FILED

JAN 31 2024

BY



MAIL TO:

Division of Business Services

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