

FEB 0 7 2024

Annual Report for the year: Limited Liability Company

2024

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

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

Entity ID Number	2. Exact name of the Limited Liability Company			
1659959	ODEN HOME IMPROVEMENT, LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
236115	Engage in the business of construction and home improvement.			
5. State of Formation				
RI				
6. Principal Office Address		City	Stale	Zip
383 W Fountain Street, Suite 118		Providence	RI	02903
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Erin Oden		Contact Title Member		
Street Address 383 W Fountain Street		<sup>City</sup> Providence	State RI	<sup>Zip</sup> 02903
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			Date	
Erin Oden			01/19/2024	
Signature of Authorized Person				

MAIL TO:

**Division of Business Services** 

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

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