| State of Rhode Island Department of State - Business Services Division | | |
|---|--------------|--------|
| Annual Report for the year: Limited Liability Company Filing period: February 1 - May 1 | FEB 0 7 2024 | STAINF |
| → Filing Fee: \$50.00 → Penalty: Additional \$25.00 fee if form is not filed by May 31. | 1473_ | |

| 1. Entity in Allember | 2 Exact name of the Limited Liability Company Kendall Reiss LLC | | | | |
|---|--|---|--------------------------|-----------------------|--|
| 3. NAICS Code 711510 5. State of Formation R.I. | Brief description of the character of business conducted in Rhode Island Artist-Run Gallery & Studio | | | | |
| 6. Principal Office Address 469 Wood Street | | City Bristol | State R.I. | Zip 02809 | |
| 7. Mailing Address of Limited I | iability Company and Name | or Title of Contact Person | | 1 | |
| Contact Name Kendall Reiss | | Contact Title Single-Member Owner | | | |
| Street Address 469 Wood Street | | City Bristol | State R. I. | Z ₁ p02809 | |
| 8 The Resident Agent informa | ition currently of record with | the RI Department of State is a | ccurate. Changes require | filing Form 642. | |
| 9. Under penalty of perjury, statements, and that all state | | nave examined this report, inc are true and correct. | luding any accompany | ing schedules and | |
| Name of Authorized Person Kendall Reiss | | Date 2/1/24 | | | |
| Signature of Authorized Perso | | | I | | |

MAIL TO:

Division of Business Services

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

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