

## 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

| 1 Entity ID Number            | Exact name of the Limited Liability Company     Howl's, LLC  |   |                    |   |
|-------------------------------|--|---|--------------------|---|
| 001670229                     |  |   |                    |   |
| 3. NAICS Code<br>541613       | Brief description of the character of business conducted in Rhode Island     Intellectual Property Development and Marketing |   |                    |   |
| 5. State of Formation         |  |   |                    |   |
| 6. Principal Office Address   |  | City  | State              | Zip                                     |
| 81 Parade St.                 |  | Providence  | RI                 | 02909                                   |
| 7. Mailing Address of Limited | d Liability Company and Name o   | r Title of Contact Person                             |                    |   |
| Contact Name Peter Glantz     |  | Contact Title   |                    |   |
| Street Address 81 Parade St.  |  | City Providence                                       | State RI           | <sup>Zıp</sup> 02909                    |
| 8. The Resident Agent Inform  | nation currently of record with th   | e RI Department of State is accura                    | ate Changes requir | e filing Form 642                       |
|                               | r, I declare and affirm that I havatements contained herein are  | ve examined this report, includi<br>true and correct. | ng any accompany   | ring schedule: and                      |
| Name of Authorized Person     |  |   | Date               |   |
| Peter Glantz                  |  |   | 1-30-24            |   |
| Signature of Authorized Pen   |  |   |                    | 1 4 4 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 |

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**FILED** 

MAIL TO:

**Division of Business Services** 

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

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