RI SOS Filing Number: 202447077700 Date: 2/22/2024 4:00:00 PM



State of Rhode Island Department of State - Business Services Division

Annual Report for the year:
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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	1. Entity ID Number	2. Exact name of the Limited Lia	bility Company				
	001701270						
3. NAICS Code 4. Brief description of the character of business conducted in Rhode Island							
	311812	Raken	f Food truck				
	5. State of Formation						
,	RI		_				
	6. Principal Office Address		City	State	Zip		
/	560 mineral spri	ns alle suit 2117	Pawlnikes	12]	02860		
	7. Mailing Address of Limited Lia	. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
	Contact Name		Contact Title				
	Alina Reed		Guner				
	Street Address	· · · · · · · · · · · · · · · · · · ·	City	State	Zip		
7	1560 mineral spri	ns are suit 2117	Pantocket	127	02869		
	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			2(22/24			
	Mina Rel	d					
	Signature of Authorized Person Neces W-(-News						

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FEB 2 2 2024

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