| | hode Island | | Fee: \$50.00 |
|---|---|-------------------|---------------------|
| Providence 1 | usiness Servi River Street RI 02904-261 | ces | |
| (401) 2 | 222-3040 | | |
| Limited Liability Company Annual Report Filing Period: February 1 - May 1 | | | |
| In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00. | | | |
| ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024 | | | |
| 1. ID No. <u>001758586</u> | | | |
| 2. Exact Name of the Limited Liability Company Cardinal XI, LLC | | | |
| 3. State of Formation | | | |
| State: <u>RI</u> | | | |
| NAICS CODE | | | |
| Enter the six digit NAICS Code that best describes the primary business conducted by the entity. Download the list of codes <u>here.</u> More information on <u>NAICS</u> can be found online. | | | |
| <u>812990</u> | | | |
| 4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island | | | |
| TATTOO AND BODY PIERCING SHOP, DBA SIN ALLEY TATTOO, OPERATING UNDER THE | | | |
| LICENSING OF THE RI DEPARTMENT OF HEALTH | | | |
| 5. Principal Office Address | | | |
| No. and Street:82 MANISTEE STREETCity or Town:PAWTUCKET | State: <u>RI</u> | Zip: <u>02861</u> | Country: <u>USA</u> |
| 6. Mailing Address of Limited Liability Company and Name or Title of Contact Person: | | | |
| Contact Name: MICHAEL FASULO Contact Title: SOLE MEMBER | | | |
| No. and Street:82 MANISTEE STREETCity or Town:PAWTUCKET | State: <u>RI</u> | Zip: <u>02861</u> | Country: <u>USA</u> |

7. RESIDENT AGENT IN RHODE ISLAND - DO NOT ALTER Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

MICHAEL D. FASULO 82 MANISTEE STREET PAWTUCKET , RI 02861

8. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

Signed this 26 Day of February, 2024 at 12:08:04 PM by the authorized person. This

electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

By MICHAEL FASULO

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2024 State of Rhode Island All Rights Reserved