RI SOS Filing Number: 202448074870 Date: 3/4/2024 4:00:00 PM



State of Rhode Island

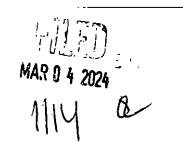
Department of State - Business Services Division

Annual Report for the year: 2024 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.



12 Valley Street 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Name Christopher Pike Street Address 12 Valley Street 8. The Resident Agent information currently of record with the RI Department of State is accurate. Cha Under penalty of perjury, I declare and affirm that I have examined this report, including any acceptable and that all statements contained herein are true and correct.		
Rhode Island 6. Principal Office Address 12 Valley Street 7. Mailing Address of Limited Liability Company and Name or Title of Contact Person Contact Name Christopher Pike Street Address 12 Valley Street City Jamestown Contact Title Member City Jamestown Street Address 12 Valley Street 8. The Resident Agent information currently of record with the RI Department of State is accurate. Cha Under penalty of perjury, I declare and affirm that I have examined this report, including any acceptable and that all statements contained herein are true and correct.	sland	
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statements, and that all statements contained herein are true and correct.	anges requir	re filing Form 642.
Name of Authorized Person	companyin	g schedules and
Christopher Pike	Date Fel 2	9 202a.
Signature of Authorized Person		

MAIL TO:

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

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