





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.

FILED	STAMP
MAR 1 2 2024	TR. ANT OF STATE
BY	S

1. Entity ID Number 001717707	2. Exact name of the Limited Liability Company KARIOne, LLC				
3. NAICS Code 531110 5. State of Formation	Brief description of the character of business conducted in Rhode Island Leasing of residential real estate.				
RI 6. Principal Office Address		City	State	Zip	
68 Indian Point Road		Tiverton	RI	02878	
7. Mailing Address of Limited	Liability Company and Name	or Title of Contact Person	<u> </u>	. •	
Contact Name		Contact Title	Contact Title		
Street Address 68 Indian Point Road		City Tiverton	State RI	^{Zip} 02878	
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		Date	Date /		
Joseph R. Marion III, Esq.		3/a	3/4/24		
Signature of Authorized Pers	on		· · · · · · · · · · · · · · · · · · ·	,	

MAIL TO:

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

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