

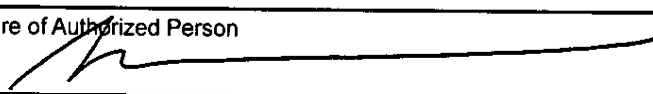


State of Rhode Island
Department of State - Business Services Division

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.

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1. Entity ID Number 000163153		2. Exact name of the Limited Liability Company Absent Malice, LLC	
3. NAICS Code 561611		4. Brief description of the character of business conducted in Rhode Island Engage in investment activities.	
5. State of Formation Rhode Island			
6. Principal Office Address 8 Ocean Heights Road		City Newport	State RI
		Zip 02840	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Steven M. Bowman		Contact Title Manager	
Street Address 8 Ocean Heights Road		City Newport	State RI
		Zip 02840	
8. The Resident Agent information currently of record with the RI Department of State is accurate. Changes require filing Form 642.			
9. <i>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.</i>			
Name of Authorized Person Steven M. Bowman		Date 2/17/24	
Signature of Authorized Person 			

FILED

MAR 12 2024

BY **ABH30**

KS

MAIL TO:

Division of Business Services
148 W. River Street, Providence, Rhode Island 02904-2615
Phone: (401) 222-3040
Website: www.sos.ri.gov