

State of Rhode Island Department of State - Business Services Division

| _CCS RIDGS BSD |2- |::::R 14 6::3:42:4

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.

2023

1. Entity ID Number	2. Exact name of the Limited Liability Company			
001688745	ninety10, LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island			
541512	SOFTWARE DEVELOPMENT WITH RI EMPOLYEES			
5. State of Formation				
MA				
6. Principal Office Address		City	State	Zip
42 Ladd Street, Unit 311		East Greenwich	RI	02818
7. Mailing Address of Limited Lia	bility Company and Name or Title	e of Contact Person		
Contact Name Robert Coulter		Conlact Title Agent		
Street Address 4 Calvert Street		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. 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	
Justin Sadler			3/13/2024	
Signature of Authorized Person	G.			

MAR 14 2024 BY 6934

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

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