



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year:  
Limited Liability Company

2024

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- Filing period: February 1 - May 1  
→ Filing Fee: \$50.00  
→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

1. Entity ID Number 000990700		2. Exact name of the Limited Liability Company Mood Design, LLC	
3. NAICS Code 541410		4. Brief description of the character of business conducted in Rhode Island Design Consultation	
5. State of Formation RI			
6. Principal Office Address 297 Laurel Ridge Lane		City North Kingstown	State RI
Zip 02852			
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name Debra Perry		Contact Title Owner	
Street Address 297 Laurel Ridge Lane		City North Kingstown	State RI
Zip 02852			
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 Debra Perry			Date 03/06/2024
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](http://www.sos.ri.gov)