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State of Rhode Island

Department of State - Business Services Division

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.



1. Entity ID Number 001007687	2. Exact name of the Limited Liability Company Tamburini Golf Performance Training LLC			
3. NAICS Code 54 7 1 2 1 5. State of Formation Rhode Island	4. Brief description of the character of business conducted in Rhode Island To conduct personal training, golf performance training and any other purpose permitted by law.			
6. Principal Office Address		City	State	Zip
1312 Atwood Avenue		Johnston	RI	02919
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person				
Contact Name Lisa M. Tamburini		Contact Title Member		
Street Address 100 Federal Way		City Johnston	State	^{Zip} 02919
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	
Lisa M. Tambarini		3/15/24		
Signature of All horized Parken Janbaria.				

FILED

MAR 1 5 2024 BY ML 9323

MAIL TO:

Division of Business Services

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

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