



State of Rhode Island
Department of State - Business Services Division

REC'D RI SOS BSD
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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.

1. Entity ID Number 000486662		2. Exact name of the Limited Liability Company KATEDEN, LLC	
3. NAICS Code 722513		4. Brief description of the character of business conducted in Rhode Island QUICK SERVICE RESTAURANT	
5. State of Formation RHODE ISLAND			
6. Principal Office Address 251 SMITH STREET		City PROVIDENCE	State RI
		Zip 02908	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person			
Contact Name JAMES T. LYNCH		Contact Title	
Street Address 251 SMITH STREET		City PROVIDENCE	State RI
		Zip 02908	
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 JAMES T. LYNCH		Date 2-27-24	
Signature of Authorized Person <i>[Signature]</i> , member			

MAIL TO:
Division of Business Services
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Phone: (401) 222-3040
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MAR 26 2024
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