

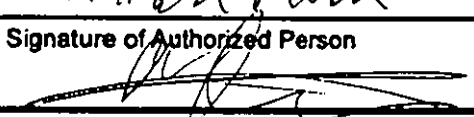


**State of Rhode Island  
Department of State - Business Services Division**

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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 <u>146377</u>		2. Exact name of the Limited Liability Company <u>REBRAND LLC</u>			
3. NAICS Code <u>541613</u>		4. Brief description of the character of business conducted in Rhode Island <u>Review, assessing, structuring effective Board Trustees</u>			
5. State of Formation <u>RI</u>					
6. Principal Office Address <u>24 CORLISS ST #6791</u>		City <u>PROVIDENCE</u>	State <u>RI</u>	Zip <u>02940</u>	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name <u>ANAEEI MODU</u>			Contact Title <u>FOUNDER + CEO</u>		
Street Address <u>54 WARRINGTON ST.</u>		City <u>PROVIDENCE</u>	State <u>RI</u>	Zip <u>02907</u>	
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 <u>ANAEEI MODU</u>				Date <u>4/17/2023</u>	
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

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 APR 17 2024  
 BY YJBRUP