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

Annual Report for the year: 2024

→ Filing period: February 1 - May 1

→ Filing Fee: \$50.00

→ Penalty: Additional \$25.00 fee if form is not filed by May 31.

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REC'D RIDOS BSD '24 APR 18 AM 10:42:00	å	

1. Entity ID Number	2. Exact name of the Limit	ted Liability Company	<del></del>	······································		
00/686082	WILD BEILE LAC					
3. NAICS Code 448120	4. Brief description of the character of business conducted in Rhode Island  Wowers Clothing					
5. State of Formation		·				
6. Principal Office Address		City	State	Zip		
20 hittebrock	Rd	Ubjlely	RI	02591		
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person						
Contact Name	Contact Title					
LOUIS CAPPUCE		Attel				
Street Address  /7 (NAW IT)	- 4	City /	State	Zip		
17 MANIE	5/-	Worley	R.L.	8289/		
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 ,			
LOUIS B.	APPLICA		4/18/	2024		
Signature of Authorized Person  Oul D. Capallello						
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APR 18 2024 BY SJ SNW

MAIL TO:

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