RI SOS Filing Number: 202453973940 Date: 4/30/2024 4:00:00 PM



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

2024

APR 3 0 2024

1462

→ 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	2. Exact name of the Limited Liability Company				
001001535	VITRUNAN	Book	Publishing	i	
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island				
81	The state of the s				
5. State of Formation	educational consulting				
R. T.					
6. Principal Office Address		City		State	Zip
236 Westministe	Provide	nce	P. I.	02903	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name		Contact Title			
Robert 1. Kuppe					
Street Address		City		State	Zip
234 Westminster St. #703		Provide	nce	R.I .	02903
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		
Robert 1. Koz			4/24/2024		
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