RI SOS Filing Number: 202453979050 Date: 4/30/2024 4:00:00 PM

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State of Rhode Island

Department of State - Business Services Division

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	2. Exact name of the Limited Liability Company			
000795426	Simple Pleasures Providence LLC			
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island Retail store of gifts, clothing, jewelry, etc.			
453220				
5. State of Formation		J.,	t	
Rhode Island			1	
6. Principal Office Address	<u> </u>	City	State	Zıp
6 Richmond Square		Providence	ŔI	02906
7. Mailing Address of Limited	Liability Company and Name or Title	e of Contact Person	l	.
Contact Name Mary Moore		Contact Title Owner		
Street Address 6 Richmond Square		City Providence	State RI	^{Zip} 02906
8. The Resident Agent inform	ation currently of record with the RI	Department of State is accura	ate Changes require	filing Form 642.
	I declare and affirm that I have externed to the large true true to the large true true true true true true true tru		ng any accompany	ing schedules and
Name of Authorized Person			Date	
Mary Moore			4/24/2024	
Signature of Authorized Person	on - 100 S	22		
1	<u> </u>		1	

MAIL TO:

Division of Business Services

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

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