RI SOS Filing Number: 202454466630 Date: 5/6/2024 4:00:00 PM



## State of Rhode Island

## **Department of State - Business Services Division**

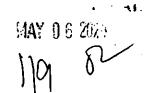
Annual Report for the year: Limited Liability Company

2024

→ 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				
001746176	Ocean State Tattoo LLC				
3. NAICS Code 812990	Brief description of the character of business conducted in Rhode Island OTHER PERSONAL CARE SERVICES				
5. State of Formation RI					
6. Principal Office Address		City .	State	Zip	
1567 Plainfield Pike UNIT 2		Johnston	RI	02919	
7. Mailing Address of Limited	Liability Company and Name	or Title of Contact Person	1		
Contact Name Szymon Wojcik		Contact Title Owner			
Street Address 27 Chestnut Grove Ave		City Cumberland	State RI	<sup>Zip</sup> 02864	
8. The Resident Agent inform	ation currently of record with	the RI Department of State is accura	ate. Changes require	e filing Form 642.	
	I declare and affirm that I h tements contained herein a	rave examined this report, including true and correct.	ng any accompany	ing schedules and	
Name of Authorized Person Szymon Wojcik			Date 04/23/202	-	
Signature of Authorized Pers	W DOW				

**Division of Business Services** 

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

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