RI SOS Filing Number: 202454756650 Date: 5/22/2024 11:51:00 AM



State of Rhode Island Department of State - Business Services Division

→ 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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Entity ID Number	2. Exact name of the Limited Liability Company				
00171072	Liftmissy	Apparel Co	mpan	r	
3. NAiCS Code	4. Brief description of the character of business conducted in Rhode Island				
315120	sports appound				
5. State of Formation					
RI					
6. Principal Office Address		City	State	Zip	
966 victory truy		Greene	RI	02827	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Contact Name		Contact Title			
Casey Wuma		Founder			
Street Address		City	State	Zip	
966 Victory Fruit		Greene	Re	02827.	
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		
Casey Qu		15/3/2	4		
Signature of Authorized Person					
My (a)					

FILED

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MAY 2 2 2024

BY CYBWS

MAIL TO:

Division of Business Services 148 W. River Street, Providence, Rhode Island 02904-2615

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