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State of Rhode Island

Department of State - Business Services Division

Annual Report for the year: Limited Liability Company

2023

→ 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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1. Entity ID Number	2. Exact name of the Limited Liability Company						
001670899	GRAYSON FITNESS, LLC						
3. NAICS Code	4. Brief description of the character of business conducted in Rhode Island						
713940	wrestling/fitness						
5. State of Formation	1 11103 (7/1/1003)						
RI							
6. Principal Office Address		City	State	Zip			
39 COLFAX ST		WARNICH	RI	02886			
7. Mailing Address of Limited Lia	bility Company and Name or Title	of Contact Person					
Contact Name TYLER GRAY SOW		Contact Title PREST DEWT					
Street Address 39 COLFAX ST		City	State IZI	^{Zip} 02886			
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 TYLER GRAYSON			Date 24 MAY 2024				
Signature of Authorized Person Tylu Way							

MAIL TO:

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

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

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MAY 24 2024

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