RI SOS Filing Number: 202455307950 Date: 5/31/2024 4:00:00 PM

DocuSign Envelope ID: 5598E345-5C11-4E11-A43E-C569704853E5



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 001682977	2. Exact name of the Limited Liability Company Hungry Ghost Press LLC 4. Brief description of the character of business conducted in Rhode Island RETAIL CLOTHING SALES			
3. NAICS Code 448110				
5. State of Formation RI				
6. Principal Office Address 50 Sims Avenue, Unit 113		City Providence	State RI	Zlp 02909
7. Mailing Address of Limite	ed Liability Company and Name o	r Title of Contact Person		
Contact Name Christopher W. Morrison		Contact Title Authorized Person		
Street Address 50 Sims Avenue, Unit 113		City Providence	State RI	Zip 02909
8. The Resident Agent Infor	mation currently of record with th	e RI Department of State is ac	curate. Changes requ	ire filing Form 642.
Under penalty of perjury, statements, and that all s	i declare and affirm that I have latements contained herein are	examined this report, includ true and correct.	ing any accompanyl	ng schedules and
Name of Authorized Person Christopher W. Morrison			Date 5/30/2024 4:25 PM EDT	
Signature of Authorized Per	rson Christopher W. Morri	CALA	_	

FILED

MAY 31 2024

MAIL TO:

Division of Business Services

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

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