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State of Rhode Island

Department of State - Business Services Division

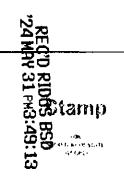
Annual Report for the year: 2024

Limited Llability 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 001738352		Exact name of the Limited Liability Company Lonelyville Events Management Company, LLC Brief description of the character of business conducted in Rhode Island To operate a catering or like business, all ancillary purposes, and all other lawful purposes.			
3. NAICS Code 722320	1				
5. State of Formation RI					
6. Principal Office Address 50 Sirns Avenue, Unit 113		City Providence	State RI	Zip 02909	
7. Mailing Address of Limite	d Liability Company and Name	or Title of Contact Person			
Contact Name Christopher W. Morrison		Contact Title Manager			
Street Address 50 Sims Avenue, Unit 113		City Providence	State RI	Zlp 02909	
8. The Resident Agent Infor	mation currently of record with t	he RI Department of State is ac	curate. Changes requ	ire filing Form 642.	
Under penalty of perjury, statements, and that all st	i declare and affirm that I hav atements contained herein a	e examined this report, include true and correct.	ing any accompany	ing schedules and	
Name of Authorized Person Christopher W. Morrison		Date 5/30/2024		4:25 PM EDT	
Signature of Authorized Per	Bon (Linistopher W. Mor	nisou			

MAIL TO:

Division of Business Services

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

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

MAY 31 2024