RI SOS Filing Number: 202455904690 Date: 6/17/2024 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.

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1. Entity ID Number	2. Exact name of the Limited Liability Company				
001696103	White Obsession UC				
3. NAICS Code	Brief description of the character of business conducted in Rhode Island				
812/12	_			(
5: State of Formation					
\mathcal{R}_{1}	teeth whi	Lening Cos	Me + c	<u></u>	
6. Principal Office Address 🏒	54	City	State	Zip	
mobile Ri	verview DR.	Notow.	07/	02901	
7. Mailing Address of Limited Liability Company and Name or Title of Contact Person					
Coplect Name	Coplect Name		Contact Title		
Otephanie Giampietro ownor					
Street Address	<u> </u>	City /	State	Zip Co	
24 KIVEN	1P() ()2	1 Va PNU	<i> </i> C/	0274	
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 7		
Stephonie Gampietro			JUL	1/2/	
Signature of Authorized Persen					

JUN 17 2024 BY VS G-35

MAIL TO:

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

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